

# Grants Managers Network

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## Contribution Transmittal Form 2010

### Organization Information

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Web address: \_\_\_\_\_

Assets (or total giving) as of most recent \$ \_\_\_\_\_ as of \_\_\_\_/\_\_\_\_/\_\_\_\_  
fiscal year end:

Grantmaking Organization's Assets*	Contributing Organization Membership
\$0 - \$5,000,000	\$250
\$5,000,001 - \$10,000,000	\$500
\$10,000,001 - \$ 25,000,000	\$750
\$25,000,001 - \$ 50,000,000	\$1,000
\$50,000,001 - \$ 100,000,000	\$1,500
\$100,000,001 - \$ 500,000,000	\$2,000
\$500,000,001 - \$ 1,000,000,000	\$2,500
\$1,000,000,001 and greater	\$5,000
Sponsoring Organization	\$5,001 - \$100,000+

\*If your organization is not endowed, visit [www.gmnetwork.org/support](http://www.gmnetwork.org/support) for levels by total annual giving.

### Amount of contribution

\$ \_\_\_\_\_ contributing organization membership contribution AND/OR

\$ \_\_\_\_\_ grant AND/OR

\$ \_\_\_\_\_ individual contribution (please include matching gift form if applicable)

Please mail your check payable to the **Grants Managers Network** together with this form to:

**Michelle Greanias**  
**Executive Director**  
**Grants Managers Network**  
1101 14th Street, NW, Suite 420  
Washington, DC 20005

**Thank you for your support!**

**GMN Members at your organization (attach additional sheets if needed)**

**Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

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