

Yes, I would like to help Lenox residents pursue their goal of higher education. Please accept by tax-deductible donation of:

() \$_____ () \$200 () \$100 () \$50 () \$25 () \$10

Please fill out and send along with your check to: **Lenox Scholarship Fund, C/O Town Hall, Lenox, MA 01240.**

NAME: _____

Please include name if you wish your name to appear in the Annual Town Report.

(Specific dollar amounts will not be listed)