

# Ouachita County Historical Society Contributions

I wish to make a contribution to OCHS.

I wish to make a contribution to OCHS.

**IN HONOR OF:**

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

I wish to make a contribution to OCHS.

**IN MEMORY OF:**

Name \_\_\_\_\_

Acknowledgement to be sent to:

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Name of Contributor: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone: (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Amount of contribution enclosed: \$ \_\_\_\_\_ Date \_\_\_\_\_

\* **Print this form and send with your check or money order to:**

**OCHS  
926 Washington St. NW  
Camden, AR 71701**