

Independent Feature Project (IFP)
Fiscal Sponsorship Contribution Form

Donor's Name _____

Donor's Address _____

Contribution Amount _____

This contribution is to be used to support the following project:

Project Name (the "Project"): At Your Cervix

Producer of the Project: Amy Jo Goddard

In connection with my contribution:

I understand and agree that my contribution is made on the condition that Independent Feature Project (IFP) retains control and discretion over the use of the funds.

I understand that my contribution may be released by IFP to the Project before the balance of the budgeted production funds is available to the producer of the Project

I understand that the above-named Project, if produced, might never be released.

Signature of Donor

Please send a check in the amount of your contribution made payable to IFP, with the name of the Project written in the memo portion of your check, and the completed contribution form to the following:

Mr. Rupert Chiarella
Fiscal Sponsorship Manager
IFP
104 W. 29th Street, 12th Floor
New York, NY 10001

or

You can send your check directly to the Producer of the Sponsored Project who will mail it to IFP.

Make all checks Payable to IFP Fiscal Sponsorship. IFP will send your donor thank you letter shortly, which acknowledges your tax deductible donation.

For contributions other than check, please contact Mr. Rupert Chiarella; rchiarella@ifp.org