James E. West Fellowship



Application Process

Donor completes the James E. West Fellowship application and returns it to Scouting America, W. D. Boyce Council. Forms may be mailed to:

W. D. Boyce Council 614 NE Madison Ave Peoria, IL 61603-3833

Name	e(s) to a	ppea	r on certificate:		
Comp	pany na	me (i	f applicable):		
Maili	ng addr	ess:			
City:				State: _	Zip code:
Phone	e:			_Email addres	S
	I wou	ld lik	e more information about plann	eed giving.	
	\$1,000	0+ B	ronze Member Level		\$10,000+ Gold Member Level
	\$5,000	0+ Si	lver Member Level		\$15,000+ Diamond Member Level
Name	of done	or (if	different from above):		
This g	gift is:		Anonymous		
			In honor <u>or</u> □ in memory of: _		
Gift l	Designa	tion			
			f membership as a James E. Weica, W. D. Boyce Council locate		reby designate my gift to the Endowment Fund linois.
Siana	iture:				Date