



Business Name _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

Check Payment:

Pay to the Order of: **Liberty County High School FBLA.**

Send all checks (with the donation form filled out) to **Liberty County High School.**

Address: **3216 E Oglethorpe Hwy, Hinesville, GA 31313.**

Card Payment:

Go to www.libertycountyhs.org, click 'Pay Fines' on the homepage, and fill out the Activity Account form.

*Make sure to select 'FBLA' under the 'Activity' area.

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- LCHS FBLA agrees to reward all benefits matching the donation amount tier in a timely manner.

Business Signature _____ Date _____