



TSPP RESIDENT-FELLOW MEMBER TRAVEL SCHOLARSHIP FUND

We're Making a Difference for Our Patients, Profession and Communities

Use the form below when you mail, fax or email your donation

METHOD OF PAYMENT:

Check

Please make your check payable to payable to "Texas Society of Psychiatric Physicians". Do NOT make check payable to RFM Scholarship Program or it will be returned. You may write RFM Scholarship in the Notes Section of Your Check.
Mail to: 401 West 15th Street, Suite #675, Austin, TX 78701.

Credit Card

Visa MasterCard Discover Credit Card

Name of Cardholder (as it appears on card) _____

Card # _____

Exp Date _____ Security Code _____

Credit Card Billing Address _____

Zip Code _____

DONOR INFORMATION:

Name _____

Address (if different from billing address) _____

Professional dues and/or Scholarship Fund donations may not be claimed as charitable contributions but may be deductible as ordinary and necessary business expense, less the estimated percentage of the dues used for lobbying. Estimated lobbying expenses for 2018-19 are 10%.

THANK YOU FOR YOUR SUPPORT!