

Lab Task-01

localhost:81/html/HTML_Layout(Lab%20Task-01).html

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* - Denotes Required Information.

>1 Donation >2 Confirmation >3 Thank you!

Donar Information

First name*

Last name*

Company

Address1*

Address2

City*

State*

Zip Code*

Country*

Phone*

Fax

Email

Donation Amount* ☐ None ☐ \$50 ☐ \$75 ☐ \$100 ☐ \$250
☐ Other

(Check a button or type in your amount)

Other Amount\$

Recurring Donation ☐ I am interested in giving on a regular basis.

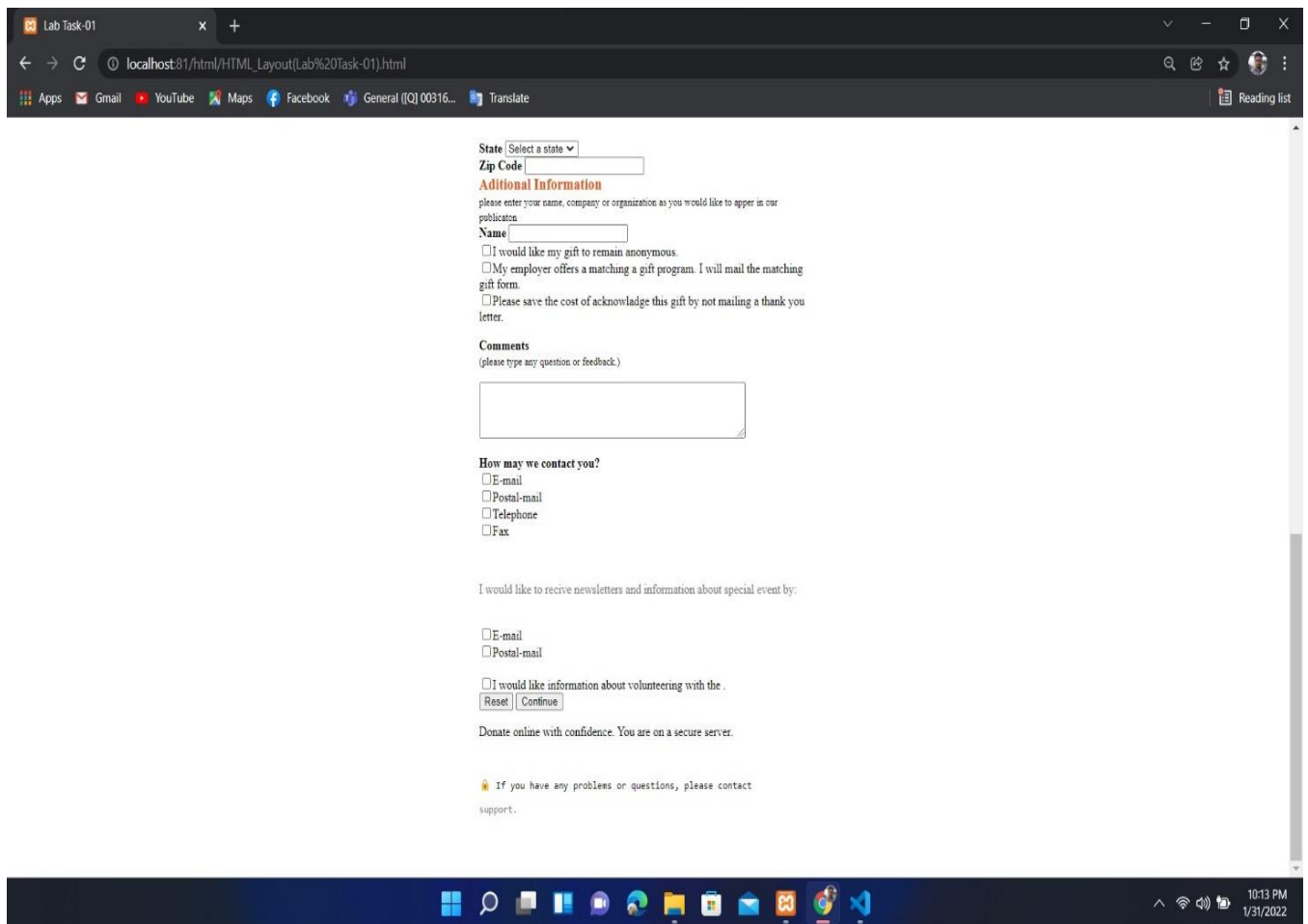
(Check if yes.)

Monthly credit Card \$ For Months

Honorarium and Memorial Denotes Required Information

I would like to make this

10:12 PM
1/31/2022



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Monthly credit Card \$ For Months

Honorarium and Memorial Donates Required Information

I would like to make this donation: ☐ To honor ☐ In memory of

Name

Acknowledge donation To

Address

City

State (Select a state)

Zip Code

Additional Information

please enter your name, company or organization as you would like to appear in our publication.

Name

☐ I would like my gift to remain anonymous.

☐ My employer offers a matching a gift program. I will mail the matching gift form.

☐ Please save the cost of acknowledge this gift by not mailing a thank you letter.

Comments
(please type any question or feedback.)

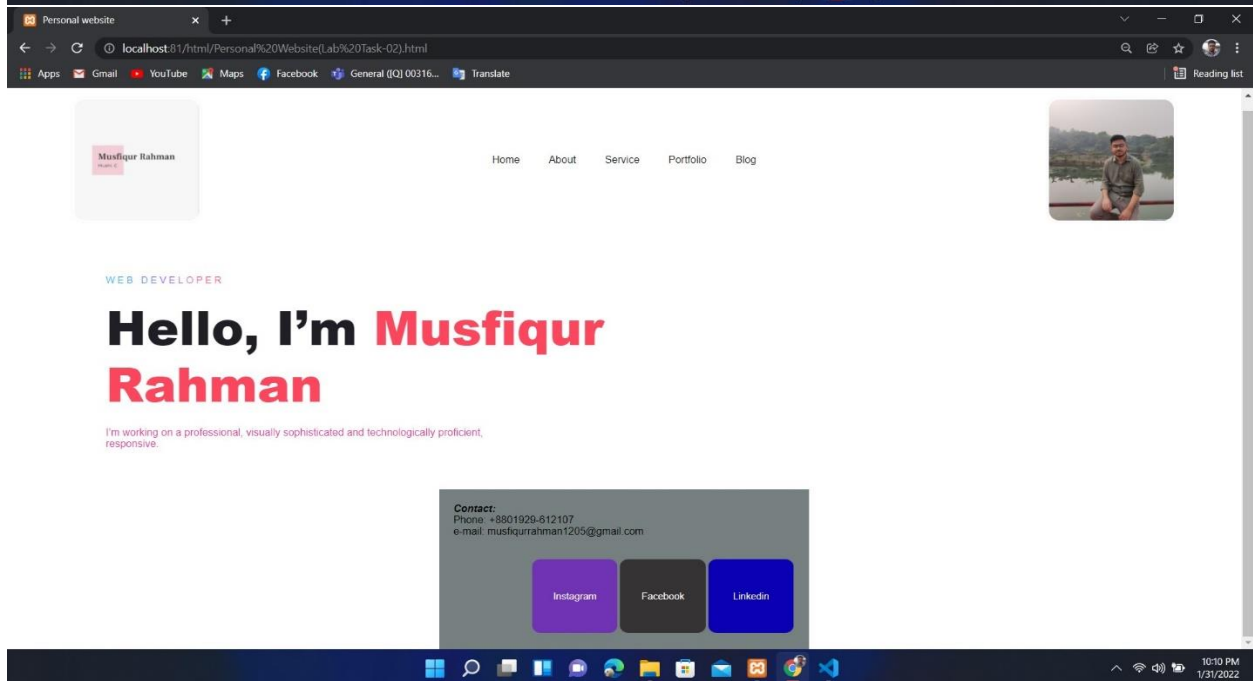
How may we contact you?

☐ E-mail

☐ Postal-mail

☐ Telephone

☐ Fax



Pic: Lab Task (01 & 02)