

# Donation Form



I'm ready to make my tax deductible contribution to the North Carolina Firefighters Fund.

## Donor Information

▲ NAME \_\_\_\_\_

▲ ADDRESS \_\_\_\_\_

▲ CITY \_\_\_\_\_ ▲ STATE \_\_\_\_\_ ▲ ZIP \_\_\_\_\_

▲ PHONE \_\_\_\_\_

▲ EMAIL \_\_\_\_\_

## Donation Information

AMOUNT: \$ \_\_\_\_\_

THIS GIFT IS GIVEN (OPTIONAL, SELECT ONE):

As a gift for:       In honor of:       In memory of:

▲ YOUR MESSAGE HERE

Visit [www.ncfirefightersfund.org](http://www.ncfirefightersfund.org) to see your memorial message and others from our generous donors.

CHECK ALL THAT APPLY

I have included my company's matching gift form.  
 I wish my contribution to remain anonymous.

## Payment

Check enclosed       Visa       MasterCard  
Make checks payable to NC Firefighters Fund.

▲ NAME ON CARD \_\_\_\_\_

▲ CARD NUMBER \_\_\_\_\_

▲ SECURITY CODE \_\_\_\_\_ ▲ EXP. DATE \_\_\_\_\_

▲ SIGNATURE \_\_\_\_\_

Please mail your contribution to:

NC Firefighters Fund  
216 Lewisville-  
Clemmons Road  
Lewisville, NC 27023

I PREFER A WRITTEN ACKNOWLEDGEMENT FOR MY RECORDS.

Email       U.S. mail       None