

Donation (monetary)

Please mail this form and your check or money order to: CCDJFS

(at the above listed address)

Date:	(Please PRINT all information clearly)
Enclosed is my check in the amount of \$ _	payable to CCDJFS .
My Name:	
Address:	Home Phone: ()
City/State/ZIP:	
(Receipt will be	sent to the address above)
TYPE OF DONATION (Please choose one):	
☐ General Donation	
☐ A Donation For:	
	(list specific event or division)
☐ Gift in memory or honor of:	
□ Girt in memory or nonor or.	(name of individual or business)
Send acknowledgement card to:	
Name:	
Address:	
City/State/ZIP:	
How would you like the card to be signed?	
How would you like the card to be signe	(name or names)

We thank you for your support.

Your contribution may be tax-deductible

Donation (non-monetary)

Please mail this form and your check or money order to:

Rachel Ketterman, Director

Jill Jurjavcic, Human Resources Administrator



Rachel Ketterman, Director

CCDJFS (at the above listed address)

Date:	_ (Please PRINT all information clearly)
Enclosed is my check in the amount of $\$$ _	payable to CCDJFS .
My Name:	
Address:	Home Phone: ()
City/State/ZIP:(Receipt will be	e sent to the address above)
ITEM(S) TO BE DONATED:	
TYPE OF DONATION (Please choose one):	
☐ General Donation	
☐ A Donation For:	
	(list specific event or division)
☐ Gift in memory or honor of:	
	(name of individual or business)
Send acknowledgement card to:	
Name:	
Address:	
City/State/ZIP:	
How would you like the card to be signe	ed?
Ma thank way	(name or names)

We thank you for your support. Your contribution may be tax-deductible