



CONTRIBUTION FORM

Your contribution is 100% deductible (Federal EIN #20-1308918). More importantly, it is priceless in our united efforts to keep our community and residents safe.

This contribution is in memory of: _____

The following information is kept confidential.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email: _____

Yes, I want to contribute to the Douglas County Sheriff's Advisory Council's efforts to help keep our community and residents safe.

\$1,500 \$1,000 \$750 \$500 \$200 \$100 Other _____

Method of payment:

Check enclosed, made payable to Douglas County Sheriff's Advisory Council

Please bill my credit card: Visa M/C Am Ex Discover

Account number: _____ Exp. date: _____

Security Code _____

Signature _____

Thank you!

Please mail this form and your contribution to:
Douglas County Sheriff's Advisory Council
P.O. Box 1002
Minden, NV 89423

www.douglasconvsheriff.com