

# PRINT & SEND DONATION FORM

Please mail your tax-deductible donation with this form to:

The New York State Trooper Foundation, Inc.  
3 Airport Park Blvd.  
Latham, NY 12110



## Donor Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

## Address Information

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Your Donation (please check one)

\$25     \$50     \$100     \$500     \$1000     Other Amount: \_\_\_\_\_

## Payment Options

I have enclosed a check made payable to The New York State Trooper Foundation     I would like to charge my contribution

Card Type: \_\_\_\_\_ Card Number: \_\_\_\_\_  
(VISA, Mastercard, Discover, AmEX)

Card Exp (MM/YYYY): \_\_\_\_\_ CCV#: \_\_\_\_\_ Signature: \_\_\_\_\_

## Honor/Memorial Gifts (optional)

I'd like to dedicate my donation.

Tribute To     In Memory Of     In Honor Of

## Honoree Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

## Program Gifts (optional)

Please make my donation to the program below.

Police Survivors Program     Disaster Relief Program     Trooper Foundation Scholarship Program  
 Major Equipment Acquisitions-Firearms Training Simulator     Special Projects

***Your support is greatly appreciated!***

Check here if you would like to receive an acknowledgment