



Please send in your donation with this form to:

Newsday Charities
P.O. Box 21538
New York, NY 10087-1538

Personal Information:

Prefix First M.I. Last Suffix

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Is this donation on behalf of an organization? Yes No Org. Name

Street Address Apt./Unit

City State Zip

Phone Email

Donation Information:

I would like to make a gift in the amount of: \$

Enclosed is my check payable to Newsday Charities

Please charge my: Visa MasterCard Discover American Express

Card Number Exp. Signature

I would like to make this a recurring gift. Charge my credit card \$ on the first Monday of every month until further notice.

Have you included an employer matching gift form? Yes No

Tribute Gift:

You can choose to make your gift a tribute to a person you know or admire.

Please make my gift: In honor of In memory of

If you would like this individual or his/her family to receive a letter from Newsday Charities recognizing your gift, please include the contact information below.

Three horizontal lines for contact information.

Your name and donation may be listed in future publications or online. To be included, check "Yes" below.

- Yes, publish my name as:
No, do not publish my information.

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