



**CATTARAUGUS REGION  
COMMUNITY FOUNDATION**

*Enriching lives in the Southern Tier*

**Donation Form Allegany Nordic Equipment Fund**

**Donor Information**

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State : \_\_\_ Zip: \_\_\_\_\_  
Daytime phone  Home  Bus: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_

I/we would like to make a gift of \$ \_\_\_\_\_ on \_\_\_\_\_ (date) to:

**Community Fund** (to be used for most pressing needs as determined by the board of directors)

**The \_\_\_\_\_ Fund** (name fund of your choice)

**Enclosed is: \$ \_\_\_\_\_** *Make check payable to Cattaraugus Region Community Foundation.*

**Please charge to my credit card:**  MasterCard®  Visa®  Discover Card®  American Express®

Card number: \_\_\_\_\_ CSC: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Check if applicable:**

**This gift is in memory of:** \_\_\_\_\_

**This gift is in honor of:** \_\_\_\_\_

**Please send acknowledgment to:**

Name: \_\_\_\_\_

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

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

*The Cattaraugus Region Community Foundation is a nonprofit 501 (c) (3) organization. Donations are tax deductible to the extent provided by law.*

Please return form to: Allegany Nordic • P. O. Box 661 • Jamestown, NY 14702-0661

Ph. 716.372.4433 • Fax 716.372.7912 • [foundation@cattfoundation.org](mailto:foundation@cattfoundation.org) • [www.cattfoundation.org](http://www.cattfoundation.org)