

**South Norfolk County ARC
789 Clapboardtree St.
Westwood MA 02090**

Donor Form

I wish to make a gift of \$_____ to South Norfolk County ARC.

_____ My check is enclosed

_____ Please charge my credit card.

_____ VISA number: _____ Exp. Date _____

_____ MasterCard number: _____ Exp. Date: _____

_____ AmEx number: _____ Exp. Date: _____

My name: _____

Company (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Telephone: _____

My signature (for credit card only): _____

Is there any special designation or dedication for your gift? If this is an “in honor” or “in memory” gift, please be sure to give us the name of the person being honored or memorialized and also let us know if there are people we should notify of your gift (family members of the person being honored or memorialized). Include their addresses, please.

Thank you! We will send you an acknowledgement and receipt for tax purposes.
SNCARC is a 501(c)(3) organization.