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Constable Public Safety Memorial Foundation Inc.

20615 Woodside Court
Bend, Oregon 97708-6415

www.ConstableFoundation.org
info@ConstableFoundation.org
Fax: 541-383-1966



Donation Form

I / We would like to make a donation in the amount of: \$ _____ .00 to the Constable Public Safety Memorial Foundation, Inc. to help with their important programs to help families of law enforcement officers killed in the line and duty and wounded military personnel. I understand that 10% of my donation will be given to the Fisher House to help pay travel expenses of a needy military family travel to Walter Reed National Military Medical Center to visit their critically injured loved one.

PAYMENT METHOD: *Enclosed is my / our check made payable to the Constable Public Safety Memorial Foundation, Inc. (or)*

Charge my credit card (Circle One): VISA MasterCard American Express Discover

Account Number: _____ Exp. Date: _____

Name On Card: _____ CVC# _____

Signature: _____ Date: _____

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Name (print): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone#: _____ FAX#: _____

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Note: For any donation over \$25 you will receive **Iwo Jima...in the First Wave (DVD)** (51 minutes) shipped to you free of charge.
Thank you for your generosity and support.