



# I Want to Donate to North Florida Educational Development Corporation!

*ALL INFORMATION IS HELD STRICTLY CONFIDENTIAL*

FIRST Name

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LAST Name

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Street 1

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Street 2

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City

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State

Zip Code

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Phone #

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E-MAIL

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E-mail this form to: [bossnfedc@gmail.com](mailto:bossnfedc@gmail.com)

MAIL this form to: **North Florida Educational Development Corporation  
P.O. Box 550, Gretna, Florida 32332**

\_\_\_\_\_ I'm enclosing a donation in the amount of \$\_\_\_\_\_ **Check Cash \$-order.**

\_\_\_\_\_ I'd like to donate using a credit card: **VISA MC AMEX DISCOVER**

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Security Code \_\_\_\_\_ (If MC or VISA, last 3 numbers on BACK of card, If AMEX, 4 numbers on front of card)

Amount \$\_\_\_\_\_ *Continue to donate each month until I tell you to stop:* **YES NO**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

***Thank You!***