

Tobacco Free Rhode Island Donation Form

Make a Donation That Will Save Lives

To send a donation by mail, print and complete this form.

- 1) To pay using your credit card, complete the credit card section in full.
- 2) To pay using a check, make your check payable to the American Lung Association of the Northeast and write "TFRI" in the memo line.
- 3) Mail to:

Tobacco Free Rhode Island
c/o American Lung Association of the Northeast
260 West Exchange Street, Suite 102B
Providence, RI 02903

PLEASE PRINT CLEARLY

Full Name : _____
Street: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Choose One:

- Regular Donation
 In Honor of *(choose this option if the person you are honoring is living)*
 In Memory of *(choose this option if the person you are honoring is deceased)*

Honoree Title: _____ *(Example: Mr., Mrs., Ms., Miss, Mr. & Mrs., Dr., etc.)*

Honoree Name: _____

Note: *If you would like a photograph of your honoree(s) to be featured with your donation on our website's Gifts for Liife Wall, please mail it with this form.*

I wish to give anonymously *(your name will not be listed on our Gifts for Life Wall or in any public reports).*

Credit Card Type: American Express Discover MasterCard Visa

Credit Card Number: _____

Expiration Date: _____ Month _____ Year

CVV Number: _____

Every credit card has a security code used to help verify that the card is in your possession. If you have a Visa, Mastercard or Discover, turn the card over. In the signature box or just to the right of it, you will see a series of digits. However long the series, the final three digits are the security code. American Express cardholders can find their security code on the front of the card, either to the left or right of the embossed 15-digit card number. These four digits are printed in black, not embossed.

Signature: _____

THANK YOU!