



**CYPRESS
POLICE
FOUNDATION**

Contribution Form

Name: _____

Date: _____

Business Name: _____

Address: _____

Email: _____

Phone: _____

COMMUNITY SUPPORTER

- \$50 Friend
- \$100 Patron
- \$500 Supporter
- \$1,000 Associate
- \$_____ Other

BUSINESS SUPPORTER

- \$500 Bronze
- \$1,000 Silver
- \$2,000 Gold
- \$5,000 Platinum
- \$_____ Other

Payment Information*

____ Visa ____ MasterCard ____ American Express ____ Check

Name on the Card _____ Date _____

Card Number _____

Exp. Date _____ CVN _____ (req'd)

City _____ State _____ Zip Code _____

Signature _____

Mail Contribution Form and payment to the Cypress Police Foundation at P.O. Box 1443, Cypress, CA 90630.

* Privacy Policy – The Cypress Police Foundation does not share its mailing list with other organizations.

I wish my donation to remain anonymous

THANK YOU FOR YOUR SUPPORT!

All donations are tax deductible per Section 170 of the Internal Revenue Code.

The Cypress Police Foundation is a 501(c)(3) non-profit corporation.