## NAPA CARE EMERGENCY BENEVOLENT FUND

## **Donation/Pledge Form**

Company/Individual Name:		Company:			
Company Representative Title:		Address:			
Contact Phone Number(s): Work:	Cell:			Other:	
Preferred Number: ☐ Work	□ Cell	□ Othe	r		
Is this a company donation? Is this an individual donation? Signature of Company Repres		□ No □ No			_Date
Amount to be donated: \$  Date of donation:		_``	dollars)		
Payment options (check one <a> In full</a>	box):		a.d ann	slls.	
<ul> <li>Multiyear pledge, up to five years, invoiced annually (minimum total multiyear pledge of \$5,000)</li> </ul>					
Check payable to NAPAREF					

Please return form by mail, fax, or email

Address: NAPAREF NAPA Care, 5100 Forbes Blvd., Lanham, MD 20706-4407

Fax: 301-731-4621

Email: dlucas@asphaltpavement.org

The NAPA Research & Education Foundation manages and disburses all charitable contributions for the NAPA Care Emergency Benevolent Fund.

Tax deductibility is at the full donated amount. Please consult your tax advisor.



