## "NAPA CARE" EMERGENCY BENEVOLENT FUND

**Donation/Pledge Form** 

Company/Individual Name:		Company:		
Company Representative Title:		Address:		-
	Contact Pho	ne Number(s)	:	_
Work: Cell:			Other:	-
Preferred Number: ☐ Wo	rk 🗆 Cell I	☐ Other		]
Is this a company donation? ☐ Yes ☐ No Is this an individual donation? ☐ Yes ☐ No Signature of Company Representative Date				
Amount to be donated: \$ (in U.S. dollars) Date of donation: Payment options:  □ In full				
■ Multi-year up to five	ve (5) years (mi	inimum of \$5,00	00) invoiced annually	
	Check pay	able to NAPAR	EF	
Please return form to:				
NAPAREF NAPA Care, 510	0 Forbes Blvd	., Lanham, MD	20706-4407	
Via fax: 301-731-4321				
Via Email: <a href="mailto:cwilson@asphaltr">cwilson@asphaltr</a>	pavement.org			
Toy Doductibility is at t	ha full danata	d amount Dia	ease consult vour tax adviso	

The NAPA Research & Education Foundation manages and disburses all charitable contributions for the "NAPA Care" Emergency Benevolent Fund. NAPA Associate Member Council and the NAPA Associate Members administer the program in conjunction with NAPAREF.

