

Donation Payment Form

District # _____ Unit # _____ Town _____ Date _____

Address: _____ Signature: _____

Future Leaders Fund _____

Fort Harrison _____

Emergency Fund _____

Miles City _____

Children & Youth _____

Columbia Falls _____

Child Welfare Foundation _____

Aloha Scholarship (PPP) _____

(We no longer have representation in
Glendive)

Dept. Pres Project _____

Freedoms Foundation _____

Girls State _____

(MT)Junior Activities _____

SPECIAL MEMORIALS:

Spirit of Youth _____

Memorial for _____

Nat'l Pres Project _____

Program _____

Scholarship (Dept.) _____

CMN _____

Donation Amount _____

Montana Chapter-Comfort Warriors _____

Send notification to:

National Creative Arts _____

National Endowment Fund _____

Total Donation _____

Check # _____

IMPORTANT NOTE:

Please restrict your donations to this list!!!
Donations sent other organizations can be detailed on the
Unit's annual year-end report **and reported to**
Community Service Chair