NCMS Alliance 97th Annual Fund

Donor's Name			
Print your name as it should appear for reco	ognition in the NCMSA	Tarheel Tandem newsletter	
☐ Check here if you prefer your donation be anonymous			
Address	City	State	Zip
Annual Fund Donor Levels (please check one bo	ox helow)		
☐ Sadie McCain Circle (includes ten packs of 4 cards each and	,	ments in the Tarheel Tar	ndem) \$500 & ahove
☐ Champion (includes six packs of 4 cards each and six acknown	_		•
■ Mentor (includes four packs of 4 cards each and four acknow	•	,	
■ Advocate (includes two packs of 4 cards each and two acknowns)	-	•	
☐ Friend (includes one pack of 4 cards each and one acknowledge)			
□ Surprise us with a donation level of your choice			
Surprise us with a donation level of your thorte	•••••		Ψ
I want to honor these special people for	the NCMS A	lliance Annual F	und
These special people will be recognized in the next issue of the			
Please print:			
☐ In honor/memory (circle one) of:	of: In honor/memory (circle one) of:		
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Danna and	Diagon	-: -4-d-£	
Payment	Please mail completed form to:		
☐ Check (Please make your check payable to NCMS Alliance)	NCMS Alliance, 1500 Sunday Drive, Suite 102, Raleigh, NC 27607		
Credit Card:	Donors will	receive cards within	three weeks of NCMSA
Credit Card #	receiving donations and their special people will be		
CVV2 #	recognized i	n the next Tarheel Ta	andem.
Exp. Date	Thank you for your support!		
Name on Card			
Signature	NCMS Alliance is a 501(c)(3) charitable organization and donations are tax-deductible.		