



## Thank You for your support!

Individual or  Corporate

Dr.

Mr.

Mrs.

Ms.

\_\_\_\_\_  
Donor Name *(please print)*

\_\_\_\_\_  
Donor Signature *(required)*

\_\_\_\_\_  
Company Name *(only if corporate gift - or - if work is preferred mailing address)*

\_\_\_\_\_  
Preferred Mailing Address  Home  Work

\_\_\_\_\_  
City State Zip  This is a new Address

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
E-mail

### Donation Information

\_\_\_\_\_  
Name of Recognition *(please print how you would like your name to appear in all recognition materials)*

I Wish to Remain Anonymous This is a Gift in  Honor  Memory of \_\_\_\_\_

**Total Donation \$** \_\_\_\_\_

Check Enclosed *(please make checks payable to: Seminole County Heroes Memorial Association, Inc.)*

**Send contribution to: Seminole Heroes • 1101 East First Street, Sanford, FL 32771-1468**

**Credit card payments** can also be made online at [www.seminoleheroes.org](http://www.seminoleheroes.org)

**Seminole County Heroes Memorial Association, Inc.** • 1101 East First Street, Sanford, FL 32771-1468  
President • **Frank Ioppolo** Vice President • **Robert Kohl** Secretary • **Cynthia Coto** Treasurer • **Lisa Spriggs**

THE FLORIDA REGISTRATION NUMBER FOR SEMINOLE COUNTY HEROES MEMORIAL ASSOCIATION, INC. IS CH24101. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.