

DONATION FORM

Breast Friends Forever of Champaign County

Supporting our mission in breast health awareness, raising money to support our services, and to honor survivors of Champaign County. All donors will be recognized on our website during the year they were donated.



Donor	
Contact Person	

Address	
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City		State		Zip	
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Donation

Item Donation	
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Retail Value of Donation	\$
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Gift Certificate Donation	\$	Expiration Date	
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GIFT CERTIFICATE/GIFT CARD: Enclosed OR BFF to create certificate

Monetary Donation	\$	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card <input type="checkbox"/> Invoice # _____
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Item Description (Please be complete as possible to include use restrictions or any additional information as not listed above)

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ITEM DELIVERY:

To be delivered by Donor To be picked up by Committee - Scheduled date for pick up or delivery: _____

Please submit eForm to treasurerbffocc@gmail.com or print out and mail to: Breast Friends Forever of Champaign County, % Brenda Hollar, P.O. Box 12, Mechanicsburg, OH 43044

Questions? Please contact Kris Campbell at (937-)408-2288 or via email, at: breastfriendsforeverofcc@gmail.com

Our most sincere Thank You for your support!

Our mission is to educate, empower, encourage, and embrace all who reside or work in Champaign County, Ohio, that are at risk for breast cancer and provide services to breast cancer patients in need.