



HELPING OUR NEIGHBORS DONATION FORM

Any Amount Is Appreciated

Name: _____

Address: _____

E-Mail: _____ **Phone:** _____

I wish to donate \$_____ to help those less fortunate.

Make checks payable to
The Sound Beach Civic Association
and mail your donation to:

Sound Beach Civic Assoc.
PO Box 295
Sound Beach, NY, 11789