

New York Police and Fire
Widows' and Children's Benefit Fund

www.answerthecall.org

Giving Opportunities

- | | |
|--|---|
| <input type="checkbox"/> CHIEF BENEFACTOR \$150,000 | <input type="checkbox"/> PLATINUM FRIEND \$1000 |
| <input type="checkbox"/> BRASS & GOLD STRIPES \$100,000 | <input type="checkbox"/> GOLD FRIEND \$750 |
| <input type="checkbox"/> COURAGE, PRIDE & BROTHERHOOD \$50,000 | <input type="checkbox"/> SILVER FRIEND \$500 |
| <input type="checkbox"/> NEVER FORGET \$25,000 | <input type="checkbox"/> BRONZE FRIEND \$250 |
| <input type="checkbox"/> 10-13 ANSWER THE CALL \$10,000 | <input type="checkbox"/> FRIEND _____ |
| <input type="checkbox"/> PROBIES & CADETS \$2,000 | |

I would like to learn more about the Benefit Fund

(Estate Planning, Corporate/Foundation Opportunities, General Information, or Becoming an Ambassador)

Name: _____
Company/Affiliation: _____
Address: _____
City/State/Zip: _____
Telephone/Cell: _____
E-mail: _____

PAYMENT OPTIONS

Check Enclosed _____ Please make checks payable to the New York Police and Fire Widows' and Children's Benefit Fund Please mail to: Police and Fire Benefit Fund, 767 Fifth Avenue, Room 2614C, NY, NY 10153

Fax Form _____ Attention to Linda Giammona, 212.310.8808

Phone In _____ Call Linda Giammona, 212.735.4505

On Line _____

Visit www.AnswertheCall.org

Credit Card Information:

Gift Amount _____
Card Type _____
(MC, VISA, AMEX)
Card Holder Name: _____
Card Number: _____
Expiration Date: _____
Billing Address: _____
Card Holder's Signature: _____