



TEAM FISHER HOUSE

for the West Haven VAMC Fisher House

Check Donation Form

To ensure that your campaign is credited properly for a check donation, each check must be accompanied by this completed form and mailed to the address below. This check donation will be entered into your online campaign when the check and completed form are received by Fisher House.

DONOR INFORMATION

First Name _____ Last Name _____

E-mail Address _____

Street Address _____

City _____ State _____ Zip Code _____

FUNDRAISER INFORMATION

First Name _____ Last Name _____

Campaign West Haven VAMC Fisher House

DONATION DETAILS

- Make my donation public (donation displayed on online campaign page; donor's name and donation displayed shown on report)
- Make my donation anonymous (donation NOT displayed on online campaign page; donor's name is hidden, donation amount displayed on report)
- Hide Donation Amount (donation NOT displayed on online campaign page; donor's name is displayed, donation amount hidden on report)

MAILING ADDRESS

Mail check, written to "Fisher House Foundation," and completed form to:

Fisher House Foundation
Attn: West Haven VAMC Fisher House
PO Box 4510
Rockville, MD 20849-4510



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