

Canadian	Coas	st	Guard	Auxiliary	
Newfoundland &			Labrador		

I am enclosing a donation of:

\$35		\$50	□ \$100	[\$250	Other:	
 Mr. First name: _ Address: 			☐ Ms		Last name:		
City:					Prov:		Postal code:
Country:					Home telep	hone:	
Cheque	or mo	ney order p	ayable to: Ca	nac	dian Coast G	uard Auxiliary	y - Newfoundland & Labrador
Type of Dor	ation	🗌 Gene	ral Donatior	ı	🗌 In Men	nory 🗌 I	n Honour
Gift in memo	ory of:	(name of dec	ceased)				
Gift in honou	Ir of:	(name of ind	ividual)				
Send acknow	vledger	ment card to	o:				
First name:					Last name:		
Address:							Cuitor
City:					Prov:		Postal code:
How would y	vou like	the card to	be signed?	-	(name or name	5)	

Please mail or fax this form to

Canadian Coast Guard Auxiliary

Newfoundland & Labrador P.O. Box 938 St. John's, NL A1C 5M3 Fax: (709) 772-4109