

## fundraiser DONATIONS

Thank you for choosing to raise funds for Autism New Jersey. Your contribution will help us to continue ensuring safe and fulfilling lives for individuals with autism, their families, and the professionals who support them.

To help facilitate the processing of your donations and fundraising incentives, please mail all donations with this completed donation deposit form to:

Autism New Jersey Attention AA Month 500 Horizon Drive, Suite 530 Robbinsville, NJ 08691

PLEASE MAKE CHECKS PAYABLE TO Autism New Jersey

**Questions?** Contact us at aamonth@autismnj.org

To show our appreciation, we will be sending you the following prizes!



To participate in our incentive program, donations must be received by June 30, 2024. Please note, only donations of \$100 or more will receive a thank you letter unless requested.

AMBASSADOR NAME OR EVENT ORGANIZER			
MAILING ADDRESS [PLEASE CIRCLE ONE: HOME   WORK ]			
EMAIL	PHONE # [PLEASE CIRCLE	ONE: HOME   WORK   CELL ]	
NAME OF SCHOOL OR BUSINESS			
TYPE OF FUNDRAISER (I.E. DRESS DO	WN DAY, BAKE SALE, ETC.)		
NUMBER OF CHECKS INCLOSED:		TOTAL AMOUNT OF DONATION ENCLOSED: $\underline{\$}$	