

# Sturgeon City Donation Form



Yes, I want to help promote community conservation and stewardship focused on water quality.

Name: (Mr/Ms/Mrs) \_\_\_\_\_ Tel: \_\_\_\_\_  Home or  Work  
Address: \_\_\_\_\_ E-mail: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZipCode: \_\_\_\_\_

## Payment Options

### A. Monthly Pre-Authorized Plan

- \$9/month  \$19/month  \$29/month  \$39/month  Other \_\_\_\_\_  
 My void check is enclosed.  
 Bill my credit card monthly until I state otherwise.

I, \_\_\_\_\_, authorize  
Sturgeon City of Jacksonville, Inc. to debit my account  
for \$ \_\_\_\_\_ every month beginning \_\_\_\_\_ until I notify otherwise.  
Signature \_\_\_\_\_ Date ( / / ) (dd/mm/yyyy)

### B. One Time Donation

- \$75  
 \$125  
 \$250  
 \$500  
 Other \$ \_\_\_\_\_  
 Personal check or money order enclosed  
(Payable to **Sturgeon City of Jacksonville, Inc.**)  
 Bill my credit card once.

## Credit Card Information

Charge my:    

Cardholder's name (including any initials)

Card #

Expiration date (month/year)

Cardholder Signature

Date

## Thank you for Your Support

**Fax (910) 938-0053**

**[www.sturgeoncity.org](http://www.sturgeoncity.org)**

E-mail: [donate@sturgeoncity.org](mailto:donate@sturgeoncity.org) or Mail to: Sturgeon City, PO Box 128, Jacksonville, NC 28541-0128 • Tel. 910 938-5220