

PATRON DONOR FORM

Make donation payable to "Sidney Veterans Memorial Park Association"

\$10	\$25	\$50 _	\$100	Other Amount: \$_	
lame:					
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'ity/State:					
ip:					
Optional:	Phone: ()	E-mail	Address:	
Initial her	e: IF	you need a	receipt mai	led to you for docume	entation purposes.
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	Sidno	Mail form and your check to: Sidney Veterans Memorial Park Assn., P.O. Box 632 Sidney NV 13838			

THANK YOU
YOUR DONATION IS SINCERELY APPRECIATED