



Concerns of Police Survivors Contribution Form

Please mail this form and your check to:

Concerns of Police Survivors

P.O. Box 3199

Camdenton, MO 65202

Enclosed is my/our check in made payable to Concerns of Police Survivors (C.O.P.S.)

Contact information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

I/We would like my/our names to appear in any donor listings as follows:

Type of donation:

General Donation

Gift in Memory of: _____

Send acknowledgement letter to:

Name: _____

Address: _____

City/State/Zip: _____

Gift in Honor of: _____

Send acknowledgement letter to:

Name: _____

Address: _____

City/State/Zip: _____

We thank you for your support! C.O.P.S. is a non-profit 501(c)3 organization. Contributions are tax-deductible to the full extent of the law.