

CFO REVITALIZATION

YES, I want to be a part of it!

Enclosed is my gift for: \$ _____

I will make a monthly contribution of:

\$20.00 \$25.00 \$50.00 \$100.00 \$200.00 Other _____

Please have someone contact me about setting up an Electronic Transfer.

I am already contributing through the Electronic Transfer program. Please increase my gift to:

\$20.00 \$25.00 \$50.00 \$100.00 \$200.00 Other _____

Please have someone contact me about establishing a charitable gift annuity.

Please have someone contact me about giving a gift of stock.

Please send me more information about the Revitalization program.



| | | | | | |
|-----------|-------|----|-------|-----|-------|
| DATE | _____ | | | | |
| NAME | _____ | | | | |
| ADDRESS | _____ | | | | |
| CITY | _____ | ST | _____ | ZIP | _____ |
| TELEPHONE | _____ | | | | |
| E-MAIL | _____ | | | | |

In the U.S., please return this form and your gift to:

Association of Camps Farthest Out, Inc., 317 S. Madison Avenue, Watkins Glen, NY 14891
PH: 607-535-4415 E- mail: debbie@acfona.org

Canadians -- for a tax exempt receipt, please return the form and your gift payable to:

Canadian Arm of CFO % Mrs. Evelyn Jenvey
R R 7, Box 8049, 1239 Zadow Road, Pembroke, Ontario K8A 6W8

*Gifts to Association of Camps Farthest Out, Inc. are tax-deductible.
Please return this form with your contribution. Thank You.*