# Coast Guard Auxiliary Association Donation Form

**Donor Information**

| | | | |
|---|---|---|---|
| Name | | Company | |
| Address | | | |
| City, State, Zip | | Phone | |
| Email | | | |

**Donation Frequency**

☑ One-time Gift ☑ Recurring Gift (Monthly)

**Donation Amount**

☐ $50 ☐ $100 ☐ $250 ☐ $500 ☐ $1,000 ☑ Other: $_____

**Designation**

☐ General Fund to support the US Coast Guard Auxiliary

☐ Auxiliary Unit Name: _____Unit Number (NNN-NN-NN): _____

☐ Auxiliary Unit Special Program: _____

☐ Recruitment Grants ☐ Affiliate Membership ☐ Campaign for Zero

☐ Where most needed

**Options**

☐ Legacy Giving (in memory of): _____

District: _____ Flotilla:_____

☐ Make this anonymous

☐ Please cover processing fees so 100% of my contribution is available for use

**Matching Gift**

Does your employer offer matching gifts? ☐ Yes ☑ No

Employer Name: _____

**Total Donation Amount: $_____**

**Method of Payment**: ☐**Mastercard** ☐**Visa** ☐**Discover** ☐**Amex** ☐**Check or Money Order**

**Name on Card**: _____

**Credit Card Number**: _____

**Expiration Date (MM/YY)**: _____**CVV Code**: _____

**Card Holder's Signature**_____

**Or Credit Card by Phone: (618) 823.5009**

Checks Payable To: **Coast Guard Auxiliary Association, Inc.**

Mail To: **1301 W. First Street, Suite E-1, Granite City, IL 62040**

The Coast Guard Auxiliary Association, Inc. is a 501(c)(3) nonprofit organization. Donations are tax-deductible to the extent permitted by law. No goods or services were provided in exchange for this contribution