



Donation Form

This printable form is available for supporters who would like to donate via check, money order, or credit card.

Donation Amount \$ _____

Chapter (Circle One): **Greater Central NY** **Hudson Valley and Westchester** **New York City**
 Long Island **Western NY** **Capital Region NY**

Make Checks Payable to American Foundation for Suicide Prevention (AFSP)
(Please do not staple checks to this form)

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**An electronic receipt is automatically generated for all donations and sent to the email address provided. The IRS will accept a canceled check as a receipt for all donations under \$250. Donations of \$250 and above will receive a written acknowledgment letter to the address provided.*

Thank You for Your Contribution!

Mail this form and your check (please do not send cash) to:

American Foundation for Suicide Prevention (AFSP)

Attn: Data Entry

199 Water Street, 11th Floor

New York, NY 10038