



# JOHN WAYNE CANCER FOUNDATION DONATION FORM

Yes! I want to support bringing courage,  
strength and grit to the fight against cancer.

## DATE

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Please print out this form and fax to:  
949.631.8412

or mail to:  
John Wayne Cancer Foundation  
P.O. Box 1779  
Newport Beach, CA 92659-0139

### PLEASE PRINT CLEARLY

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LAST NAME FIRST NAME MIDDLE INITIAL

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SPOUSE/PARTNER NAME

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COMPANY NAME (FOR BUSINESS DONATIONS ONLY)

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MAILING ADDRESS

SUITE/APT. NO.

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CITY

STATE

ZIP

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HOME PHONE

BUSINESS PHONE

FAX NUMBER

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EMAIL ADDRESS

How would you prefer to be contacted?  Home Phone  Business Phone  Fax  E-mail

I want to make a contribution of: \$ \_\_\_\_\_ (Donations of \$10,000 or greater may be pledged over 3-5 years.)

Please make checks payable to: John Wayne Cancer Foundation.

My gift is:

in memory of  in honor of Name \_\_\_\_\_  
 Please send acknowledgment card to:

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NAME

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MAILING ADDRESS

SUITE/APT. NO.

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CITY

STATE

ZIP

- I do not want my name to appear in any publications or on the website.  
 I prefer that my gift remain anonymous.  
 Please list my/our names as follows (this pertains to all gifts of \$1,500 or greater.)

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- I/we have included JWCF in my/our will.  
 Please send me/us information on how to include JWCF in my/our will or estate.

### THANK YOU FOR SUPPORTING THE JOHN WAYNE CANCER FOUNDATION.

The John Wayne Cancer Foundation (JWCF) is a non-profit tax-exempt organization under IRC Section 501(c)(3) (Exemption #95-4023430) and is eligible to receive tax-deductible contributions under IRC Section 170. To claim a charitable deduction, the 1993 Tax Act requires that you have a written acknowledgement from the charity of any gift of \$250 or more. If you have any questions, please call the JWCF at 949.631.8400.