

**DEEP RIVER AMBULANCE ASSOCIATION**  
P.O. BOX 274, DEEP RIVER, CT 06417 NON-EMERGENCY PHONE: (860) 526-1495

**2015 Annual Fundraiser**  
*Proceeds to benefit purchase of new ambulance*

Yes! Please accept my contribution. I have enclosed a donation in the amount of \_\_\_\_\_.

Yes! I would like to purchase a Memorial Brick, and I have enclosed a donation in the amount of \_\_\_\_\_. (Must be \$100 or greater.)

I would like the engraved brick to read as follows:  
(maximum of 3 lines of text – 20 characters per line including spaces and punctuation)


*For questions on memorial bricks, please contact Betsy Macmillan at (860) 526-9574.*

Yes! I am interested in donating, but I have some questions. Please contact me at the number below.

I am unable to give at this time, but I am interested in joining the Deep River Ambulance crew and receiving medical training, **or** I would like to be a part of the Board of Directors. Please contact me at the number below.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Please mail to:**  
Deep River Ambulance Association  
P.O. Box 274  
Deep River, CT 06417

*Thank you again for all you can do to help. Remember, Deep River Ambulance is a 501(c) organization, and as such, your contribution is tax deductible to the extent allowed by law.*