



Donation Form

Yes, I would like to support the First Coast Hispanic Chamber of Commerce.

I. Donor's information

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Business phone: _____

Email: _____

II. Donation

Enclosed is my donation in the amount of:

\$50 \$100 \$200 \$400 other _____

Gifts of \$50+ enroll you in our Circle of Friends. When you donate you will receive recognition in our communications.

III. Recipient

My donation is a contribution to:

FCHCC FCHCC's Community Development, Inc (501c3)

Please send check / money order (do not send cash) and make check payable to the FCHCC or FCHCC Community Development, Inc.

IV. Please contact me with more information about:

Volunteer Opportunities

Thank you for your support!

Please mail your Donation Form and check to: **FCHCC – Circle of Friends**
PO Box 57972
Jacksonville, FL 32241