

## CASH CONTRIBUTION GIFTING FORM

Please include this slip with your check to ensure proper crediting to your Fund. You may also share this form with others you wish to contribute to your Fund.

Please contribute this gift to:

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NCF Giving Fund Number

NCF Giving Fund Name

---

Contributor Name(s)

---

Phone Number(s)

Email Address(es)

Primary Fund Holder?  Yes  No

---

Street Address

---

City

State

Zip

Address Change?  Yes  No

*If you have an address change, please write the old address on the back of this form.*



Please make checks payable to:  
**National Christian Foundation**  
Mail to ATTN: Contribution Services  
11625 Rainwater Drive, Suite 500  
Alpharetta, GA 30009

-----cut along dotted line-----

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