

Donations

If you are visiting our website – www.masponweb.org - or attending this event, you may already know how devastating it can be to lose a family member, friend or associate to suicide. With a suicide death occurring every 13 minutes, no one knows when the next person will be someone we care about.

The Michigan Association for Suicide Prevention (MASP) takes part in a variety of activities to reduce the number of suicides and support of those left behind. These include educational events and trainings, memorials, policy development and implementation, support of other advocates and organizations, and more. Your donations will help continue and expand these efforts, and greatly appreciated, regardless of the manner in which you choose to make it.

We are a 501(c)(3) non-profit organization so contributions are tax deductible in accordance with the laws of the State of Michigan. For more information, please contact our Treasurer, Mary K. Baukus.

Cut/Tear Here

Please accept a monetary donation (payable to "MASP" with a check or money order) in the amount of: \$ _____ in United States dollars and cents (USD).

In honor of: _____

In memory of: _____

Please earmark this donation for: _____

Please accept the following item(s) as a donation to MASP: _____

Acceptance has already been arranged with this MASP board member - _____ - on this date - ___/___/____ (month/day/year).

This donation has an estimated monetary value of: \$ _____ in USD.

Donor Information (for tax purposes)

6/2015

Name: _____

Organization (if any): _____

Title: _____

Address: _____

City: _____ State: ___ Zip: _____

Phone: (____) _____ home / work / cell

E-Mail Address: _____

Are you on Facebook? yes / no

How you did you learn about MASP? _____

Where should we mail an acknowledgment?

___ To you at the address on the left.

___ To a different name and/or mailing address:

Name: _____

Address: _____

City / State / Zip: _____

Can we acknowledge this donation on our website and/or Facebook account? yes / no

If yes, which name should we use? _____

Date: _____

Please complete, detach, and give to the on-site MASP representative with your donation, or mail with your check or money order to: Michigan Association for Suicide Prevention, c/o Mary Baukus, 2220 Mershon St, Saginaw, MI 48602