



Mary C. Jenkins Community Center  
**CONTRIBUTION FORM**

*Make checks payable to Community Focus Foundation;  
MCJCC on memo line*

NAME \_\_\_\_\_ PHONE(h) \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE(m) \_\_\_\_\_

\_\_\_\_\_  
(zip code)

E-MAIL \_\_\_\_\_  I wish this gift to remain anonymous

AMOUNT ENCLOSED \_\_\_\_\_

GIFT is in: \_\_\_\_\_ Honor of \_\_\_\_\_ Memory of

NAME \_\_\_\_\_  
Please send an acknowledgement of this gift (*w/o reference to amount*) to:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
City/State/Zip

Contributions are tax deductible to the full extent allowed by law.  
Return to Community Focus Foundation, PO Box 215, Brevard, NC 28712