

Pledge Form



Statewide Line of Duty Death Response Team

We provide support to Colorado law enforcement agencies, families, and communities after an officer has died in the line of duty.

Donor Information (please print or type)

Name _____
Billing address _____
City, ST Zip Code _____
Phone 1 | Phone 2 _____
Fax | Email _____

Pledge Information

I (we) pledge a total of \$ _____ to be paid: now monthly quarterly yearly.

I (we) plan to make this contribution in the form of: cash check credit card other.

Credit card type | Exp. date _____

Credit card number _____

Authorized signature _____

Acknowledgement Information

Please use the following name(s) in all acknowledgements: _____

I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Please make checks, corporate matches, or other gifts payable to:
Colorado Chiefs Of Police Foundation with "LODDRT"
in the memo line.

Statewide Line of Duty Death Response Team
C/O Civica Management
P.O. Box 3406, Englewood, CO 80155

Colorado Chiefs of Police Foundation is a 501(c)3 Charitable Organization EIN 27-0624958