



The Ride for Missing Children

Donor Pledge Form



Rider's Name _____

Address _____

City/State/Zip _____

My Total Sponsor Goal Is \$ _____

Sponsor Name	Address	City/ State/Zip	Phone	Email	Sponsored Amount	Cash/check#	Paid
John Doe	275 Lake Ave.	Rochester NY 14608	585-242-0900	johnq@ncmec.org	\$00.00		
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

Please return this form with your pledges prior to May 17, 2017
 NCMEC/NY * Attn: Ride * 275 Lake Avenue * Rochester, NY 14608
 Phone: (585) 242-0900 * Fax: (585) 242-0717

(OVER)

Office use only:
 Total pledges _____

NO ACKNOWLEDGEMENT WILL BE SENT OUT WITHOUT FULL NAME AND ADDRESS

NCMEC is a 501(c)(3) tax-exempt charity and is a publicly supported organization as defined in sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Service Code. Our Federal identification number is 52-1328557. Proceeds from this event will be used to fund NCMEC/NY's prevention education programs and support the Branch mission. For more information about NCMEC/NY call 585-242-0900.