

## 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.

this form with others you wish to contri	ibute to your fund.			
	Please contribute this gift to:			
Please make checks payable to: National Christian Foundation Mail to ATTN: Contribution Services 1150 Sanctuary Pkwy, Suite 350 Alpharetta, GA 30009	NCF Giving Fund number			NCF Giving Fund name
	Contributor name(s)			
	Phone number(s)			Email address(es)
	Primary fundholder?:	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.			
	— — cut along	dotted lin	e — —	
Cash contribution	gifting for	m		
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	Street address			
	City		State	Zip

Yes

Address change?: