



# Coast Guard Mutual Assistance

## Memorial Contribution

Acknowledgement of Memorial Contributions will be sent to both the contributor and the next-of-kin. Please make checks payable to CGMA.

### Contributor Information:

Name: Last	First	M.I.	Rate/Rank/Grade or Relationship			
Address: Street	Apt. No.	City	State	Zip Code	E-Mail Address	
Status (Please check one)						
<input type="checkbox"/> Active Duty	<input type="checkbox"/> Retired	<input type="checkbox"/> CG Civilian Employee	<input type="checkbox"/> Reserve	<input type="checkbox"/> Auxiliary	<input type="checkbox"/> NAF	<input type="checkbox"/> PHS
<input type="checkbox"/> Other						

### I would like to contribute \$ \_\_\_\_\_ to CGMA in memory of:

Name: Last	First	M.I.	Rate/Rank/Grade			
Status (Please check one)						
<input type="checkbox"/> Active Duty	<input type="checkbox"/> Retired	<input type="checkbox"/> CG Civilian Employee	<input type="checkbox"/> Reserve	<input type="checkbox"/> Auxiliary	<input type="checkbox"/> NAF	<input type="checkbox"/> PHS
<input type="checkbox"/> Other						

### Acknowledgement of this contribution should be sent to:

Name: Last	First	M.I.	Relationship to deceased		
Home Address: Street	Apt. No.	City	State	Zip Code	

**Please complete, print and send this form along with your contribution to:**

**Coast Guard Mutual Assistance**  
1005 N. Glebe Rd., Suite 220  
Arlington, VA 22201

Make checks payable to CGMA. If you prefer, you may make a secure credit card donation by visiting our website: [www.cgmahq.org](http://www.cgmahq.org) and click "Donate Now"

Contributions may also be given to any CGMA Representative.

**Do not send cash through the mail.**

**Thank you** for your contribution to Coast Guard Mutual Assistance.