



High Bridge Historical Committee Monetary Donation Form

Name Of Person or
Business _____

Address _____

City/State/Zip _____

Home/Business
Phone _____

Cell Phone _____

Email _____

Enclosed is my donation in the amount of
\$ _____

I represent that my donation is being unconditionally and voluntarily made and that I have not been promised and do not expect anything in return for my donation. In addition, no representation has been made to me about whether or not this donation is tax deductible and I agree to consult an accountant or other tax professional about this issue.

Checks should be made payable to the BOROUGH OF HIGH BRIDGE and sent to 97 West Main Street, High Bridge, NJ 08829, ATT: Borough Administrator.

If there are corporate or other
matching funds, please
complete the following for the
source of those funds:

Business or Organization
Name _____

Contact Person _____
Address _____
Phone _____

Please keep my donation confidential

Donor Signature/Date _____

High Bridge Borough Signature/Date _____