



Enclosed is my check payable to Little Falls Education Foundation for:

- \$500
- \$250
- \$100
- \$50
- \$25
- Other _____

Name: _____

Address: _____

Town: _____

State _____

Zip _____

Phone: _____

E-mail _____

I am applying for a matching gift from my employer.

Employer Name: _____

Address: _____

Town: _____

State _____

Zip _____

Contact me about donating stock.

Little Falls Township Public Schools Class of _____

Mail to:

Little Falls Education Foundation

P.O. Box 30

Little Falls, NJ 07940

LFEF is a 501(C)(3) organization.

Your gift is tax-deductible.

For more information about the foundation, visit
www.littlefallseducationfoundation.org.

Questions? Contact us at:

info@littlefallseducationfoundation.org.