



Sponsorship Donation Form

Sponsorship Entity

Organization Name: _____

Contact Person: _____

Address: _____

Telephone #: _____ Email: _____

Sponsorship Levels (choose one)

- | | | |
|----------------------------------------------------------------|----|-------------------|
| <input type="checkbox"/> - Diamond Lead State/Regional Sponsor | -- | \$25,000 Donation |
| <input type="checkbox"/> - Platinum Shield Sponsor | -- | \$15,000 Donation |
| <input type="checkbox"/> - Gold Shield Sponsor | -- | \$10,000 Donation |
| <input type="checkbox"/> - Silver Shield Sponsor | -- | \$ 7,500 Donation |
| <input type="checkbox"/> - Bronze Shield Sponsor | -- | \$ 5,000 Donation |
| <input type="checkbox"/> - Friends of Law Enforcement | -- | \$ 2,500 Donation |

**Each Sponsor's information will appear
on Copline's website by Level of Sponsorship**

Please make checks payable to Copline. Mail the check along
with the completed Sponsorship Donation Form to:

Copline
501 Iron Bridge Road, Suite 6
Freehold, NJ 07728

**YOUR ORGANIZATION'S SUPPORT OF COPLINE'S MISSION AS AN OFFICER'S
LIFE LINE IS NEEDED TODAY MORE THAN EVER!! THANK YOU.**

Copline is a registered 501c(3)charitable organization
501 Iron Bridge Road, Suite 6 Freehold, New Jersey 07728
Website: www.Copline.org