



The Auxiliary cares.

Thank you for your support on behalf of the men and women who rely on us.



Annual Dues	\$ 18.00
Life Membership	\$150.00
Voluntary Contribution	\$ _____
TOTAL:	\$ _____

Please check one:

My tax-deductible check in the amount of \$ _____ is enclosed.

Please make check payable to: Daughters of Sarah Auxiliary and send to:
Daughters of Sarah Auxiliary
180 Washington Avenue Extension
Albany, New York 12203

Charge my VISA, MasterCard, AmEx Card, Discover or Diners Club.

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I am a GE employee or retiree.

My employer will match my gift.

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A copy of the Foundation's latest annual report may be obtained by request from the Foundation or from the Office of the Attorney General, Charities Bureau, 120 Broadway, New York, New York 10271.