



SALEM COUNTY BRANCH NAACP FREEDOM FUND TICKET REQUEST

Name _____

Business/Organization _____

Address _____

Telephone# _____ # Tickets _____

_____ Check Enclosed _____ Money Order Enclosed

_____ I will not be attending a donation of _____ is enclosed

Mail checks: Attn: Thronna Busch, Salem County Branch NAACP, PO Box 25, Salem NJ 08079

All tickets must be paid for in Advance NO TICKET SALES AT DOOR



SALEM COUNTY BRANCH NAACP FREEDOM FUND AD REQUEST

Business/Organization _____

Address _____

Telephone# _____

_____ Check Enclosed _____ Money Order **Enclosed**

_____ 1/4 pg. \$30

_____ 1/2 pg. \$60

_____ Full pg. \$100

Email print ready ads: ladyjet230@gmail.com by March 10, 2025

Mail checks: Attn: Thronna Busch - Salem County Branch NAACP, PO Box 25, Salem NJ 08079

*Contributions or gifts to this Unit are generally **not deductible** as charitable contributions for Federal Income tax purposes.