



**THANK YOU FOR
SUPPORTING CTI!**

You will be contacted through the following information:

Name: _____
Address: _____
City & State: _____ **Zip Code:** _____
Email address: _____
Phone: _____ **Fax:** _____
My vocation: _____

Age: _____ **Sex:** _____ **Race:** _____

[CTI does not sale or release confidential/personal information.]

Type of Support

I'm enclosing a one-time donation of \$ _____
I'm enclosing a monthly contribution of \$ _____

Please print this page and complete this form.
Send your check or money order (absolutely no cash) payable to:

Community Telecast, Inc.
P. O. Box 11558
Omaha, Nebraska 68111

**Note: In order to provide a prompt and accurate receipt of your contribution,
please verify that all of the above information is correct prior to mailing.**
Thank you very much for your contribution!