

The Jamestown Emergency Medical Services

PO Box 8

Jamestown, Rhode Island 02835

Attn: Treasurer

I am unable to join the JEMS at this time but I would like to make a donation in the amount of: _____

NAME: _____

STREET: _____

TOWN: _____

THANK YOU! We receive funding from the Town of Jamestown. However, those funds do not cover all of the costs for the service. Your donation is tax- deductible, and is greatly appreciated.

Oct. 2005