



**GIVE BLUE HOPE**

**1243 GOLDEN GATE DR STE#2**

**PAPILLION, NEBRASKA 68046**

**[www.givebluehope.org](http://www.givebluehope.org)**

**[info@givebluehope.org](mailto:info@givebluehope.org)**

**402-906-9077**

## **GIVE BLUE HOPE'S CHARITABLE GIFT APPLICATION ACKNOWLEDGEMENT**

**BY SIGNING BELOW, YOU ACKNOWLEDGE AND UNDERSTAND THAT GIVE BLUE HOPE IS A 501c3 TAX EXEMPT NON-PROFIT CHARITABLE ORGANIZATION. IT WAS CREATED TO HELP BRIDGE THE FINANCIAL GAP FOR THE IMMEDIATE SURVIVING FAMILY OF A FALLEN LAW ENFORCEMENT OFFICER/FIRST RESPONDER KILLED IN THE LINE OF DUTY.**

**THE CHARITABLE GIFT IS VOLUNTARY WITH NO OBLIGATION TO ACCEPT OR PAY ANY PORTION OF IT BACK TO GIVE BLUE HOPE.**

### **APPLICANT INFORMATION**

**\*TODAY'S DATE:** \_\_\_\_\_

**\*PRINT THE NAME OF THE IMMEDIATE FAMILY MEMBER: WIFE, FIANCE OR ELDEST CHILD ACCEPTING CHARITABLE GIFT AND WHOSE NAME WILL BE WRITTEN ON THE CHECK: (MUST BE RELATION TO THE FALLEN OFFICER) IT IS REQUIRED FOR IRS 501C3 NON-PROFIT COMPLIANCE. THIS INFORMATION WILL REMAIN CONFIDENTIAL.**

**FIRST NAME:** \_\_\_\_\_

**LAST NAME:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**DEPENDENT CHILDREN (UNDER18) LIVING WITH THE SPOUSE OR FIANCE**

**LEGAL NAME:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**LEGAL NAME:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**LEGAL NAME:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**\*SIGNATURE OF FAMILY MEMBER OR DEPARTMENT POINT OF CONTACT:**

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**RELATIONSHIP TO THE FALLEN OFFICER:**

**OFFICER INFORMATION**

**PRINT FALLEN OFFICERS NAME:**

\_\_\_\_\_

**PRINT OFFICERS RANK:**

**BADGE#**

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**DATE OF INCIDENT:**

**END OF WATCH DATE:**

\_\_\_\_\_

**PRINT DEPARTMENT POINT OF CONTACT:**

\_\_\_\_\_

**PRINT DEPARTMENT PHONE NUMBER AND EMAIL ADDRESS:**

\_\_\_\_\_

**PRINT DEPARTMENT ADDRESS:**

\_\_\_\_\_

## CHARITABLE GIFT

ACCORDING TO THE IRS TAX CODE, THE 501c3 CHARITABLE GIFT MAY BE CONSIDERED A TAX-FREE CHARITABLE GIFT. IF APPLICABLE, YOU ACKNOWLEDGE YOU ARE RESPONSIBLE FOR ALL LOCAL, STATE AND FEDERAL TAXES

ARE YOU ACCEPTING THIS CHARITABLE GIFT

CIRCLE: Y/N

SIGNED: \_\_\_\_\_

\*ONCE THE APPLICATION IS FILLED OUT, PLEASE EMAIL BACK TO:

[info@givebluehope.org](mailto:info@givebluehope.org)

OR SEND TO:

GIVE BLUE HOPE

1243 GOLDEN GATE DR STE#2

PAPILLION, NE 68046

\*ONCE THE APPLICATION IS RECEIVED, IT WILL BE REVIEWED, AND IF APPROVED BY GIVE BLUE HOPE BOARD MEMBERS A CHECK WILL BE SENT OUT.

\*PLEASE PROVIDE THE DEPARTMENTS MAILING ADDRESS AND THE LIASON'S NAME C/O THAT WILL BE RESPONSIBLE FOR RECEIVING THE CHECK. THE CHECK WILL NOT BE SENT TO THE FAMILY'S PERSONAL ADDRESS; IT WILL BE SENT TO THE DEPARTMENT AND C/O FOR PRESENTATION TO THE FAMILY MEMBER.

## DETAILS OF CRITICAL INCIDENT