**DONATION ENVELOPE RETURN ENVELOPE**

**(BACK FLAP)**

**Yes, I/we support ABC organization**

Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we publish your name in recognition materials? \_\_\_Yes \_\_\_No

\_\_\_I/we enclose a total gift of $\_\_\_\_\_\_\_\_\_\_\_

\_\_\_I/we pledge a total gift of $\_\_\_\_\_\_\_\_\_\_\_

Pledge to be paid: \_\_\_Monthly \_\_\_Quarterly \_\_\_Semi-Annually \_\_\_Annually

Starting on:\_\_\_\_\_\_\_\_\_\_

**Payment Methods:**

Charge my credit card:

 \_\_\_MasterCard \_\_\_American Express \_\_\_Discover \_\_\_Visa

 \_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ Exp. Date:\_\_\_\_\_\_\_\_\_ Security code\_\_\_\_\_\_\_

\_\_\_Automatic withdrawal (EFT) Name on account\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_Checking (Enclose voided check) \_\_\_Savings (Enclose deposit slip)

\_\_\_Please contact me about making a donation of stocks or securities

All contributions are tax deductible to the extent permitted by law.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return to:

ABC Organization

PO Box 0000

Anywhere, WI 0000

For questions or additional information, please contact:

Thank you for your support

**(Front)**

            

 PLACE STAMP HERE

ABC Project

PO Box 0000

Anywhere, WI 00000

  