

UNLEASH THE POTENTIAL

Campaign Commitment Form

FOR RACINE

DONOR INFORMATION

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

I/we wish to remain anonymous.

CONTRIBUTION INFORMATION

I/we proudly contribute to the Unleash the Potential campaign for Racine. I/we fully intend a gift of \$ _____ to provide resources to better the lives of animals. I/we choose to provide support over this period of time:

one installment payable over two years payable over three years

Signature _____

Payment Form: check enclosed *Please make checks and corporate matches payable to: Wisconsin Humane Society
Mailing Address: 4500 West Wisconsin Avenue, Milwaukee, WI 53208*

charge property

stock other: _____

Please charge my credit card: VISA Master Card Amount _____

Credit Card Number _____ Expiration Date _____

Authorized credit card holder signature _____

I/we are interested in a Naming Opportunity: _____

My company will match my donation: yes no

Company Name _____ Amount of match _____

THANK YOU. *Donations are tax deductible to the extent allowed by law.*

If you have additional questions, please contact
Heidi Boyd, (414) 431-6129 or hboyd@wihumane.org.

