

WHS Capital Campaign Pledge Form

Please FAX, MAIL, or SCAN/E-MAIL this form to the Warrick Humane Society

 ${\it I/We}$ wish to make a gift to the Capital Campaign to benefit the Warrick Humane Society.

, ,,		•				,			
I/We commit to the following:									
Total Amount of Gift:	\$			_					
Initial Payment:	\$			_					
Balance:	\$			_					
Payable:one time OR	Over1yr	2yrs	3yrs	_4yrs	5yrs	beginning date	/	_/	
Payment Schedule (circle one):	Monthly		Quarterly		Annually				
Signature:						_ Date:	_/_	/_	
	_Personal Gift	or	Cor	porate Gi	ift	(please check one	<i>:)</i>		
Company/Organization (if approp	riate):								
Name(s):	Title:								
Billing Address:									
City:									
Telephone:			Fax:						
email:									
			l your selecti						
For Donor Recognition	, I understand my r	ame/com	npany nam	e will be	listed a	s I have written	above		
I wish to remain anony	mous.								
My gift is in honor/mer	mory of								

Please Make Checks Payable to:

Warrick Humane Society

5722 Vann Rd.

Newburgh, IN 47630

Phone # 812-858-1132 Fax # 812-490-7029 Email: warrickhs@gmail.com

Warrick Humane Society 501-C 3 Tax ID #35-1574531