

Finnish Spitz Health Network Inc



Education for breed prosperity

Mail In Donation Form

Yes, I want to help ensure the long term health of the Finnish Spitz and future generations with a donation of:

\$25 \$50 \$75 \$100 \$ _____ Other Amount

to be paid: _____ now _____ monthly _____ quarterly _____ yearly

I (we) plan to make this contribution in the form of: _____ check _____ credit card _____ other.

This donation is made in Honor in Memory of: _____

DONOR INFORMATION:

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____ Country: _____

Telephone:(Area Code) _____ Number _____

Email Address: _____

Enclosed is my check donation in the amount of \$ _____

Gift will be matched by _____ (company/family/foundation).

_____ form enclosed _____ form will be forwarded

Please make checks, corporate matches or other gifts payable to: Finnish Spitz Health Network Inc and send with your completed form to:

Mary Jo Wonnacott, Treasurer
Finnish Spitz Health Network Inc
917 Blaine Street
Norfolk, NE 68701-6016

Donations made to non-profit charitable organizations are allowable tax-deductions. Please consult with your tax advisor for more detailed filing guidelines and current state and tax law procedures. If you would like additional information please contact us at: contact@FinnishSpitzHealth.org

Thank you!