

10-10-4 ANIMALS CAMPAIGN 2008 DONOR LIST

YOUR NAME: _____ **AMOUNT COLLECTED:** _____

EMAIL ADDRESS: _____ **REGION:** _____

Make copies of this form to enter the information for everyone who donated to help the animals. Regular receipts will be sent to all donors, so be sure to get complete addresses and please print clearly. Thank You!

Name: _____

Address: _____

City: _____

State & Zip Code: _____

Amount: _____ Method of Payment: Cash Check Credit Card Online

E-Mail Address: _____

Name: _____

Address: _____

City: _____

State & Zip Code: _____

Amount: _____ Method of Payment: Cash Check Credit Card Online

E-Mail Address: _____

Name: _____

Address: _____

City: _____

State & Zip Code: _____

Amount: _____ Method of Payment: Cash Check Credit Card Online

E-Mail Address: _____

Send completed forms, along with donations to:



Noah's Wish
PO Box 4288
El Dorado Hills, CA 95762

For questions regarding the campaign please call 916-939-9474 or email us at info@noahswish.info

Remember: The campaign ends June 30, 2008