

## **CONFIDENTIAL DONATION FORM**

We will send you a letter of recognition for your donation to Cape Ann Animal Aid that can be used for all tax-deductible purposes as allowed by law. Please print clearly.

	CONTACT INFOR	MATION		
Your Name	Today's Date			
Your Mailing Address				
Phone Number	E-Mail			
Would you like to be added	I to our mailing list?   Yes	□ No □	l Already on r	nailing list
	DONATION INFOR	MATION		
Donation Amount \$				
Payment Method:   Check	k (Payable to CAAA) 🔲 Cre	edit Card (MC,	Visa, or Am E	Ex)
Number	E	xpiration Date		Verification Code
	DESIGNATION OF D	ONATION		
☐ In Memory of*			□Person	□ Dog □ Cat
☐ In Honor of*	Please print name here		□Person	<b>□</b> Dog <b>□</b> Cat
	Please print name here			· ·
Other	Please explain here			
*AC	KNOWLEDGEMENT	INFORMA	TION	
	tter to the person listed belo			onation.
Name				
Mailing Address				
Your donation will n	nake a meaningful differe Thank Yo		es of home	less animals.
	Please return this form v	vith donation	n to:	

Cape Ann Animal Aid, 4 Paws Lane, Gloucester, MA 01930

Revised 4/2014