



Donation Form

Wyoming Employees Community Outreach

Donor Information (please print or type)

Name _____

Mailing address _____

City _____

State _____

ZIP Code _____

Telephone _____

Donation Information

I (we) pledge a total of \$ _____ to be paid:
____ now ____ monthly ____ quarterly ____ yearly.

I (we) plan to make this contribution in the form of:
____ cash ____ check

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

____ I (we) wish to have our gift remain anonymous.

Signature(s): _____

Date: _____

Please make checks payable to:

Wyoming Employee Community Outreach
c/o City of Wyoming Clean Water Plant
2350 Ivanrest Ave SW
Wyoming MI 49418

Would you like us to mail you a receipt? ____ Yes ____ No, it's not necessary.

THANK YOU FOR MAKING A DIFFERENCE IN A CHILD'S LIFE!