

## SPECIFIED Donations Form Please complete, print and mail in the form below:

Given in Memory of : $\_$				
*Please Provide Recipient I	Name and Address to whom an acknowled	'gment should be sent on your behalf:		
Name:		Relationship to deceased:		
Address:				
		Zip Code:		
Given in Honor of :				
*Please Provide Recipient I	Name and Address to whom an acknowled	gment should be sent on your behalf:		
Name:				
Address:				
City:	State:	Zip Code:		
Comments / Specia	al Notes:			
Donated by:				
*Please be sure to provide	this information for your Donation Receip	t for your tax records		
Name:		Relationship:		
Address:				
City:	State:	Zip Code:		
Phone:* optional				

Please Make checks payable to The Warwick Valley Humane Society and mail to:

Warwick Valley Humane Society, Inc. P.O. Box 61, Warwick, New York 10990

All donations are tax deductible!