

Agents of Hope. . . **Building Compassion**

www.sasheboygan.org Phone 920.458.3723



Name or Business

Contact Person

Address

City

State

Zip

Telephone (work)

(home)

Yes, I support the campaign to help The Salvation Army expand and improve their facilities. Therefore, I commit \$_____ to this project. This commitment will be paid over a period of _____ years, with first payment on _____/_____/_____. This pledge will be paid: [] annually, [] semi-annually, [] quarterly, [] other

This is a Memorial Gift

In Memory/Honor of _____

Signature

Date

Volunteer

Please make checks payable and return to:

**THE SALVATION ARMY
710 Pennsylvania Avenue
Sheboygan, WI 53081**