

**DONOR INFORMATION**

Name: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

*We respect your privacy and will not disclose, distribute, or sell your personal information to anyone.*

**DONATION INFORMATION**

Donation Amount: \_\_\_\_\_

Please make checks payable to **LINKS\_STRONG INC.** and mail with completed form to the following address:

LINKS\_STRONG INC.  
PO Box 151  
DeForest, WI 53532

**THANK YOU FOR YOUR GENEROSITY!**