



PLEDGE FORM

PATRIOT ASSISTANCE DOGS

DONOR INFORMATION

FIRST AND LAST NAME

DATE:

BUSINESS NAME *(if applicable)*

ADDRESS

PHONE #

CITY & STATE

ZIPCODE

ALTERNATE PHONE #

EMAIL ADDRESS

DONATION INFORMATION

I PLEDGE AND PROMISE TO DONATE \$ TO PATRIOT ASSISTANCE DOGS

I WILL PAY THE FULL AMOUNT ALL AT ONCE:

TOTAL AMOUNT OF DONATION:

DATE OF DONATION IN FULL:

I WILL DONATE THE AMOUNT IN FULL OVER A PERIOD OF TIME:

AMOUNT OF 1ST DONATION:

DATE EACH DONATION IS DUE:

AMOUNT OF 2ND DONATION:

AMOUNT OF 3RD DONATION:

PLEASE COMPLETE AND SEND TO:

PATRIOT ASSISTANCE DOGS

28579 US Hwy 10, Detroit Lakes, MN 56501

218-844-6003 / info@padmn.org

www.patriotassistancedogs.com

Donor Signature

PAD Representative Signature

THANK YOU FOR YOUR SUPPORT!

501(c)(3) NONPROFIT