

## **Business Annual Partner Campaign Giving Form**

## Please complete this form and send it with your gift to:

Fox Cities P.A.C. Annual Partner Campaign, 400 W. College Avenue, Appleton, WI 54911

<b>DONATION AMOUNT</b>		
\$1,000 Producing Partner \$1,500 Pres	sident's Partner \$2,500 Chairman'	s Partner \$5,000 Silver Partner
\$10,000 Gold Partner \$25,000 Dia	amond Partner 🔲 \$50,000 Platinum	Partner \$100,000 Leader Partner
Other Amount \$		
I/we wish to be recognized as		
☐ I/we wish to remain anonymous ☐ I/we would like to waive benefits in order to receive the maximum tax deduction allowed by law		
DONOR DETAILS		
Primary Contact Name		
Phone	Email	
Business Street Address		
City		Zip
PAYMENT DETAILS		
One time credit card charge	☐ Enclosed check (payable to Fo	ox Cities Performing Arts Center)
Automatic recurring credit card charge to pay pledge in installments throughout a year		
monthly quarterly	semi-annually beginning	onth year
Name as it appears on card		
Signature for credit card authorization		
Card type American Express	☐ Visa ☐ Discover [	MasterCard
Credit Card number		
Expiration date		