

Willow Tree Cornerstone Child Advocacy Center
920-436-8881 • www.willowtreecac.org

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- I/we wish for my/our gift to remain anonymous.
- My company will match this gift, I have enclosed any forms.
- Contact me/us about Planned Giving options.

Please accept my/our gift of:

- \$5,000 \$2,500 \$1,000 \$500
- \$250 \$100 \$50 Other \$ _____

Payment Method:

- Check payable to Willow Tree is enclosed.
- Credit card (circle one): MasterCard / Visa
Account #: _____
Exp. Date: ____/____
- I wish to make a pledge. Please send me an invoice.



Thank you! All contributions are tax deductible.

Mail your completed form to: Willow Tree Child Advocacy Center, P.O. Box 22308, Green Bay, WI 54305-2308