



The Demeter Foundation, Inc.

MAIL-IN DONATION FORM

Donation Amount:

- _____ \$25 *Supply a monthly bus pass, which helps women get to work and school*
_____ \$50 *Support education programs, which provides resources and supplies*
_____ \$100 *Provide essentials, which include food, medication and hygiene products*
_____ \$250 *Supply women with clothes and shoes (especially winter coats and boots)*
_____ \$500 *Furnish the women's home with items, which provides a safe place to live*
_____ Other Amount

- This gift is in memory of: _____
 This gift is in honor of: _____

Please notify the following person(s) of my donation:

Name(s): _____
Address: _____ City: _____ State: _____ Zip: _____

Donor Contact Information:

Name: _____ Business Name: _____
Address: _____ City _____ State: _____
Zip Code: _____ E-mail Address _____

- Yes, you can contact me about updates, volunteer opportunities, and other ways to get involved in The Demeter Foundation.

The Demeter Foundation is exempt under Section 501(c)(3) of the IRS. This gift is tax deductible. Please make checks payable to **The Demeter Foundation, Inc.** Your donation, along with this mail-in form, can be mailed to:

The Demeter Foundation, Inc.
P.O. Box 259283
Madison, WI 53725-9283

Thank you for your generosity!

Your valuable gift helps heal and empower women in Wisconsin communities.

Questions? Please contact Alice Pauser, Executive Director, at (608) 298-3563 or tdfwi@live.com. To donate online or learn more about The Demeter Foundation, please go to www.thedemeterfoundation.com.