



Yes! I would like to give to Project SUCCESS

- | | |
|---|---|
| <input type="checkbox"/> \$5,000 Dreammaker | <input type="checkbox"/> \$250 Inspirator |
| <input type="checkbox"/> \$1,000 Champion | <input type="checkbox"/> \$100 Leader |
| <input type="checkbox"/> \$500 Believer | <input type="checkbox"/> \$_____ Friend |

I would like to contribute \$_____ each year for _____ year(s).

Select payment option:

- Cash/check (payable to Project SUCCESS)
 Credit card, *please complete the following:* Visa Mastercard Discover American Express

Card number _____ Last 3 digits off the back-side of the card _____

Exp. Date _____ Signature _____

- Please debit my credit card in the amount of \$_____ Monthly Quarterly Semi-annually
 My employer will match this gift
 I wish to remain anonymous
 I wish to be included in the Project SUCCESS funder list. Please print my name as follows:

Name (if different from above) _____

Company/Organization: _____

Address _____

City, State, Zip _____

Phone _____ E-mail _____

Optional: This gift is in honor or memory of: _____

Please notify this person of my gift (include: name and address):

Please mail to: Project SUCCESS, One Groveland Terrace, Suite 300, Minneapolis, MN 55403; or fax to: 612-377-3540

Questions? Please contact Emily Heagle, Director of Development at 612-874-0076 or emilyh@projectsuccess.org

All contributions are tax deductible.

- I am interested in learning about additional giving options I am interested in volunteering with Project SUCCESS

THANK YOU FOR YOUR CONTRIBUTION