

Winn Feline Foundation Donation Form

Please complete this form electronically and e-mail to info@winnfelinefoundation.org or print and mail to 637 Wyckoff Ave., Suite 336, Wyckoff NJ 07481

I would like to make a donation to Winn Feline Foundation to help fund important feline research to benefit the health and well-being of all cats. My gift is tax-deductible to the extent permitted by law.

Donor Name			Personal Dona	tion Busine	ess Donation	Date	
Organization Name, if a	applicable						
Street Address			Suite or Apt. Number				
City, Town or Village State		State	Province		Zip or Postal Code		
Country		E-mail address					
Please select the fund of	or project you would lik	e to support (one	choice only):				
General Or PurrFect Fund	Ricky Fund (HCM)	Bria Fund (FIP) Norwegian Forest Cat HCM Amyloidosis Birman Heart Disease Fund					
	Persian HCM						
Other Ways To Give:	Speckles Abdomin	l Cancer Kitty Kollar Customers Care			Endowmen	t	
If you would like to spo You will receive progre Learn more about the r	ss reports and a final re	port on the resea	rch, as received by \	Winn Feline Fo	undation. Please		
W18-010: Understanding FIP immunity		W18-019	W18-019: Oral cancer treatment			W18-028: Investigating arthritic pain in cats	
Is your gift is to honor a	a special person or cat?						
Memorial Donation for a special person or cat Honor Donation for a special person or cat		To honor a special vet on the Winn Honor Roll (minimum \$100 donation) To honor a special tech on the Winn Honor Roll (minimum \$100 donation)			\$100 as a j _l perso	e Virtual Memorial (minim donation) Send your cat's p og along with a 50 word or nal message to: Owinnfelinefoundation.org	photo less
Honoree		Person	Cat				
Would you like us to no	otify someone about ye	our honor/memor	ial donation?				
Acknowledgement Rec	cipient						
-					Suite or Apt. N	umber	
				Province Zip or Postal Code			
Payment Information		_	<u> </u>		_ _ .		
Donation Amount (in U	JS dollars)						
	/isa MasterCard	American Expr	ess Discover	Check made	payable to Winn	Feline Foundation	
Credit Card Number			Expiration Date CV				
Name on Credit Card _				-			
Option #1 Signature (insert electronic image print out and sign if mail	(jpg. gif, etc) of signatu		Option :	# 2 Digital Signa	ature certificate and su	bmit via e-mail)	

If paying by check, or if you prefer to mail your donation, please print out this form, complete and sign and send to: