



YES, I/WE WISH TO MAKE A PLEDGE OF: _____

- Visionary \$200,000+
- Founder \$100,000 - \$199,999
- Benefactor \$50,000 - \$99,999
- Champion \$10,000 - \$49,999
- Partner \$1,000 - \$9,999
- Friend \$50 - \$999
- Please accept my donation of\$ _____
- In-Kind Donation *Please contact us.*

CONTACT INFORMATION:

Name: _____

Address: _____

City: _____

State/Zip: _____

Phone: _____

E-mail (*optional*): _____

PLEDGE PAYMENT OPTIONS:

- My check is enclosed.
(*Check made payable to: Community Foundation of North Central Wisconsin – Note Stable Hands on the memo line.*)
- Please send me an invoice for my pledge.
- I will make a structured payment of \$_____ over the following duration: 1 year, 2 years, 3 years (*Circle one.*)

THANK YOU FOR YOUR KIND CONTRIBUTION.

Please mail pledge form with your payment to:
Stable Hands Inc., Capital Campaign
3501 Swan Avenue
Wausau, WI 54401

Donations can also be made online.
Please visit www.StableHandsTherapy.com

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All contributions to: The Stable Hands, Inc. Capital Campaign are tax deductible to the extent of the law.*