



**Make a Donation to Alison Chase/Performance**

Name as it should Appear on our Donors List:

\_\_\_\_\_

*- Leave blank to make your donation anonymous. -*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Donation Amount: *(please indicate your gift amount)*

\$5,000      \$2,000      \$1,000      \$500      \$250

Other Amount: \_\_\_\_\_

Date: \_\_\_\_\_

Please make your check payable to **Alison Chase/Performance** and mail to:

Alison Chase/Performance  
PO Box 224  
Brooksville, ME 04617

**Monthly Donations**

Regular monthly donations allow us to budget our cash flow better, may we contact you to set up a recurring monthly donation in the amount of your choice? **Yes / Maybe Later**

*Please mail this page with your donation.*

*Please keep this page for your records.*



**Receipt for Donation to Alison Chase/Performance**

Donation Amount: \_\_\_\_\_

Date: \_\_\_\_\_

Check Number: \_\_\_\_\_

Thank you for your support of our mission!

Alison Chase/Performance  
PO Box 224  
Brooksville, ME 04617