WYMAN

I/we pledge \$	_ to support Wyman's Restoration and Improvement Campaign.	
My/our gift will be paid in full by:	12/31/2025 12/31/2026	
Name(s)		
Address		
Telephone ()	E-mail	
PAYMENT:		
Payment(s) of \$ w	rill be given annually qua	arterlymonthly
My/our initial gift is enclosed.	Please invoice me as noted above.	
I/we wish to give stockplease	e send transfer instructions.	
Please charge my credit card,	including fees, as noted above:	
Card Number:		
Name on Card:		
Expiration Date:	CSV:	
RECOGNITION:		
Wyman may list my/our name	(s) as donors to this campaign.	
Name as it should be listed	d:	
I/we prefer to remain anonym	ous.	
Signature	Date _	
Signature	Date	

Please return this form to Kristine Raterman at Kristine.Raterman@wymancenter.org

All gifts will be used to support Wyman's Restoration and Improvement Campaign and its stated priorities and associated costs.