



Donation Form

First Name:

Last Name:

Address:

City:

State:

Zip:

Phone:

Email:

Donation Amount:

\$25

\$50

\$100

\$200

Other

Donation Notes:

Payment:

Send this completed form with a check made payable to *PIMSER*

PIMSER
PO Box 37
Berry, KY 41003