



PLEDGE CARD FOR THE PAM DUNN MEMORIAL FUND

Name: _____

Address: _____

CITY: _____ PROVINCE: _____

POSTAL CODE: _____ TEL HOME: _____

ANNUAL PLEDGE AMOUNT: _____ NUMBER OF YEAR(S): _____

PAYMENT DETAIL: BY CHEQUE – PAYABLE TO **THE BUTTERS FOUNDATION**

BY CREDIT CARD: NAME ON CARD: _____

CARD TYPE: VISA MASTER CARD AMERICAN EXPRESS

CARD NUMBER: _____

EXPIRY DATE: MONTH: _____ YEAR: _____ *CARD VERIFICATION # _____ *DIGITS ON SIGNATURE STRIP

PLEASE RETURN THE COMPLETED PLEDGE CARD TO:

THE BUTTERS FOUNDATION

127, RUE PRINCIPALE, SUITE 105

COWANSVILLE, QC, J2K 1J3

TEL: 450-263-4123

REGISTRATION #: 13191 0457 RR0001