

In Memoriam Donation

This donation is in memory of:

Donation Amount: \$25 \$50 \$100 Other \$_____

Donor's Name: _____ Donor's Phone: _____

Donor's Address: _____

I have enclosed a cheque/money order payable to Beagle Paws.

Please charge my credit card with the above donation amount

Visa MasterCard Amex

Card no. _____ Expiry: _____

Please send in acknowledgement to:

Name: _____

Address: _____

Beagle Paws

PO Box 28164, 48 Kenmount Rd., St. John's, NL A1B 4J8

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