



Columbia-Greene

HUMANE SOCIETY/SPCA

DONATION FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____ Date: _____

Email: _____

DONATION AMOUNT: \$ _____

Check Enclosed

Credit Card (circle one)

VISA



DISCOVER

Card Number: _____

Expires: _____ / _____ Security Code: _____

Signature: _____

Please send this form to:
CGHS/SPCA
111 Humane Society Road
Hudson, NY 12534