



Annual Fund Donation Form

Please mail to 110 Benevolent St., Providence, RI 02906

One Time Gift:

\$1,000 \$500 \$250
 \$100 \$50 \$25
 Other: \$ _____

Reoccurring Gift:

Please charge my credit card \$ _____ each month until it expires or I want to make a change.

Donor Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

My company will make a matching gift

Name of company: _____

Payment Information:

Check- A check payable to RIHS is enclosed

Credit Card: Visa MasterCard American Express

Card #: _____

Exp. Date: _____ Card Security Code: _____

Cardholder Signature: _____

Date: _____

To make a gift by phone, please call 401-331-8575 x133.

If you are interested in making a gift of appreciated stock, please call 401-331-8575 x150.

This gift is separate from membership dues and will fund educational programs, object conservation and other operational expenses. We gratefully acknowledge donors of \$100 or more in the Annual Report.