

## Yes, I want to support the WREA Foundation.

Name \_\_\_\_\_

WREA Unit or Business (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Enclosed find my contribution of \_\_\_\_\_.

Check enclosed     VISA/Mastercard

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

I would like my contribution to be used for (please check all that apply)

General support for the ongoing work of the foundation

A memorial or special gift

Given in memory of \_\_\_\_\_

Given in honor of \_\_\_\_\_

The WREA Challenge Award Program

My Legacy Fund

Please contact me to discuss establishing a Legacy Fund or long-range bequest

Please make checks payable to the **WREA Foundation**. Detach and mail this form and your payment to the WREA Foundation, 2564 Branch Street, Middleton, WI 53562, phone 608.831.5115, email [wrea@wrea.net](mailto:wrea@wrea.net)