



Collette  
Foundation

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Please fill out this form and return to us. We can only charge your credit card for the amount noted if the signature, home address and phone number is listed below.

Please drop off the form to Donna Warner or if you are outside the company you can email the form to [4017279014@faxmaker.com](mailto:4017279014@faxmaker.com) so the information is secure.

*Thank You!*

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\_\_\_\_\_  
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CREDIT CARD NUMBER: \_\_\_\_\_

EXP DATE \_\_\_\_\_ AMOUNT TO BE CHARGED:\$ \_\_\_\_\_

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