



# American Red Cross

East Shoreline Chapter

**Giving Levels:**

- Clara Barton Society (\$1,000 and up)
- Chairman's Society (\$500 - \$999)
- Leadership Society (\$100 - \$499)
- Donor Club (\$35 - \$99)
- Friend (up to \$35)

*Yes! I want to help make our community a safe and healthy place to work and live by supporting the American Red Cross East Shoreline Chapter ! My gift will stay locally to help the residents of Arenac, Bay, Huron and Tuscola counties.*

**Enclosed is my tax-deductible gift of:**

- \$1000 \$500 \$250 \$100 \$50 \$35 \$\_\_\_\_\_

Name \_\_\_\_\_  
(Please print name as you wish it to appear in annual report)

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Please charge my gift to:  Visa  Mastercard Exp. Date \_\_\_\_\_

Card # \_\_\_\_\_ Signature \_\_\_\_\_

**I WANT TO MAKE A PLEDGE:**

My pledge gift to the Red Cross is: \$\_\_\_\_\_. Of this gift, I have enclosed : \$\_\_\_\_\_.

Please send a pledge reminder  Quarterly  Monthly

For the remainder of the pledge, please bill my credit card \$\_\_\_\_\_  Quarterly  Monthly

*If this gift is in honor of a living person or a memorial gift, please complete the following:*

In honor of \_\_\_\_\_

In memory of \_\_\_\_\_

Send acknowledgment to: Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

I have included the East Shoreline Chapter in my will.

I would like information about including the American Red Cross in my will.

I want to learn how to earn money by making a gift to the American Red Cross.

Thank you for your donation! Your gift is tax-deductible to the full extent as allowed by law.

Please make checks payable to: **American Red Cross East Shoreline Chapter,**

228 Washington Ave., Bay City, MI 48708