



## RESCUE/REHOME DONATION VOUCHER

Amount Donated: \_\_\_\_\_

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Name:

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Address:

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City, State ZIP:

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Home Phone:

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Cell Phone:

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Email:

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Fill out this form completely and mail along with \$USD to:

ISSDC-Rescue/Rehome Donation  
c/o Carol Cernak, Treasurer  
70 Spring St S  
South Salem NY 10590

*thank you for your kindness*