



Donation Summary Form

Please visit our website to pay by credit card.

**If you are fundraising: Due to our small staff, if donating by check, we strongly encourage schools to collect individual donation checks and send WFSS one check.

Donor Name: _____

Contact Name (for organizations): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Please send checks and money orders to:

Water for South Sudan
P.O. Box 25551
Rochester, NY 14625

Please make checks payable to "Water for South Sudan." We recommend using postal tracking when sending checks.

If this donation is for the **Iron Giraffe Challenge**, please check box:

Donation Amount: \$_____

Paid by: Check Wire Money Order

If this donation is on behalf of a school/organization, list name here:

This donation is directed to:

Operating Funds Capital Equipment Fund Where needed most

Would you like a tax receipt for this donation? Yes No

All donations of \$250 and above will automatically be receipted by WFSS.

Would you like to receive WFSS email news? Yes No