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Your Name: _____

Email Address: _____ Phone: _____

I would like to make a gift to INPCS in the amount of:

\$100 \$250 \$365 (Give \$1 a day!) \$500 \$1000 \$1500 Other \$ _____

To Go Towards:

General GTSC Fund

Method of Payment

Check MasterCard Visa American Express Discover

Name on Card: _____ Expiration Date: _____

Card Number: _____ Security Code: _____

Billing Address: _____ Billing Zip Code: _____

Signature: _____

INPCS is a 501(c)(3) organization recognized by the IRS