



Donate to the Phelps Historical Society

Date: _____

Member Name: _____

Mailing Address: _____

City / State / Zip: _____

Phone Number: _____

Email: _____

\$ _____ Donation Amount

Specify museum donation category:

_____ Phelps "New" Building Fund

_____ General Museum Fund

If there is a specific area of the museum you would like your donation to go towards, please note below.

Make checks payable to: Phelps Historical Museum

Donate Receipt

\$ _____ Donation Amount

_____ Check No.

_____ Date of Donation

Phelps Historical Museum, P.O. Box 324, Phelps, WI 54554

THANK YOU
Keep this portion for your records