



CONTRIBUTION/PLEDGE FORM

Please clearly print all information.

CONTRIBUTOR INFORMATION (Your personal information is kept confidential.)

Name _____

Address _____

City _____ State _____ ZIP Code _____

Home _____ Work _____ Cell _____

Email _____

Signature _____ Date _____

CONTRIBUTION OF CASH TO PATTERSON FOUNDATION

I would prefer that this contribution and/or name be kept confidential. Thanks!

I AM PLEASED TO MAKE A ONE-TIME DONATION IN THE AMOUNT OF \$ _____ .

PLEDGE TO PATTERSON FOUNDATION

I would prefer that this contribution and/or name be kept confidential. Thanks!

I AM PLEASED TO MAKE A PLEDGE TOTALING \$ _____

to be paid monthly, quarterly, semi-annually, or annually for _____ years beginning on

(month/year) _____ or as follows: _____

CONTRIBUTION OF SECURITIES OR STOCKS TO PATTERSON FOUNDATION

Please contact Tina Ellering, Patterson Foundation Controller
at (651) 994-2102 or Christina.Ellering@pattersoncompanies.com

PLEASE FORWARD COMPLETED FORM AND PAYMENT (if applicable) TO:

Lindsay Stewart, lindsay.stewart@pattersoncompanies.com

Patterson Foundation

1031 Mendota Heights Road, St. Paul, MN 55120

www.pattersonfoundation.net | Phone: (651) 994-2193