



CAMP AMERICAN LEGION

DONATION FORM

Department of Wisconsin
Camp American Legion
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Lake Tomahawk, Wisconsin 54539

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Post Unit _____ of _____
 Number City, State Zip Code

wishes to donate \$ _____ to Camp American Legion, to be used for: _____

_____ state purpose or restrictions

Signature

Position

MAKE ALL CHECKS PAYABLE TO DEPARTMENT OF WISCONSIN

For information on projects and opportunities for Giving, please contact the Camp Director at 1-715-277-2510.