



Becky's Gift Equine Relief  
c/o Pamela Angus-Harrison  
PO Box 31  
Brookline, NH 03033

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Amount Donated \$ \_\_\_\_\_

Make checks payable to Becky's Gift Equine Relief

Would you like to receive updates and further information about  
our organization ( ) Yes ( ) No

Contact information: e-mail \_\_\_\_\_

Phone: \_\_ (\_\_\_\_) \_\_\_\_\_



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