



**I WOULD LIKE TO MAKE A TAX DEDUCTIBLE DONATION
TO CANTON MAIN STREET, INC. IN THE AMOUNT OF**

\$ _____

First Name: _____

Last Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

Telephone: _____

E-mail: _____

Check Enclosed (*Made payable to: Canton Main Street, Inc.*)

Credit Card (*Circle One*)



Card Number: _____

Expiration Date: ____/____/____

Comments: