



Abandoned Children's Fund

DONATION FORM FOR MAKING A SPECIAL OCCASION GIFT

THANK YOU for choosing the work of Abandoned Children's Fund to mark the value of someone you care about. Please print this two-page form, fill it out completely, and fax to (888) 884-0567 (credit card donations only) or mail to:

Abandoned Children's Fund
ID-GEN-A
2360 Mendocino Ave. A2-220
Santa Rosa, CA 95403-3154
Phone/Fax: (888) 884-0567

Amount of Gift: \$ _____

_____ One-time gift _____ Monthly gift (unless specified, only one thank you letter will be sent at the end of the year)

_____ Other

Method of Payment:

_____ Check or Money Order (Please make your check payable to *Abandoned Children's Fund*)

_____ Credit Card Type: _____ VISA _____ MasterCard _____ AmEx _____ Discover

Authorized Signature: _____

Credit Card Number: _____ Expiration Date: _____

Your Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Gift Recipient Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Donation Instructions:

Please use my gift for the following:

- | | | |
|--|---|--|
| <input type="checkbox"/> Where most needed | <input type="checkbox"/> Children's Homes | <input type="checkbox"/> Feeding Programs |
| <input type="checkbox"/> Immunization Programs | <input type="checkbox"/> Education | <input type="checkbox"/> Vocational Training |
| <input type="checkbox"/> Clean Water Projects | <input type="checkbox"/> Micro-Enterprise Development | |
| <input type="checkbox"/> Other instructions or comments: _____ | | |
-
-

Gift Card Message: _____

Thank you! Your gift is tax deductible as allowed by law.