



Send Hope



755 Heritage Pkwy Allen TX 75002 (NEW Mailing Address)

972-499-1660 SendHope2011@gmail.com www.send-hope.org

Tax ID 75-2833981 a 501 c(3) US non-profit organization

EMPLOYER MATCHING DONATIONS

If your employer participates in contribution matching please send us the information to apply and you will double your contribution.

I WOULD LIKE TO MAKE A MONTHLY

DONATION OF: \$ _____

PERSONAL INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

PHONE: _____

DONATION BY CREDIT CARD

The undersigned hereby authorizes Send Hope to charge a monthly donation in the amount of \$_____ to my credit card as indicated below, beginning _____. I may write Send Hope at any time to terminate this agreement.

CREDIT CARD

Master Card Visa Discover

_____ CARD NUMBER

_____ EXP DATE

_____ CCV

_____ CARDHOLDER'S NAME

_____ SIGNATURE

CANCELLATION:

Contact **Send Hope** in writing to terminate automatic charge

I WOULD LIKE TO MAKE A ONE TIME

DONATION OF: \$ _____

USE FOR:

- Education Hosacks in Honduras
- Greatest Need Medical Transportation
- Medical Treatment Other _____

CREDIT CARD

Master Card Visa Discover

_____ CARD NUMBER

_____ EXP DATE

_____ CCV

_____ CARDHOLDER'S NAME

_____ SIGNATURE

DONATION BY BANK DEBIT

The undersigned hereby authorizes Send Hope to draw a monthly donation in the amount of \$_____ from my bank account as indicated below, beginning _____. I may write Send Hope at any time to terminate this agreement.

TYPE OF BANK ACCOUNT

Checking Savings

NOTE: For accuracy, please attach one of your personal checks marked "VOID".

_____ ACCOUNT NUMBER

The following financial institution is hereby authorized to debit the account of the undersigned:

_____ NAME OF FINANCIAL INSTITUTION

_____ BRANCH

_____ ADDRESS OF FINANCIAL INSTITUTION

_____ CITY

_____ STATE

_____ ZIP

_____ SIGNATURE

_____ TODAY'S DATE

CANCELLATION:

Contact **Send Hope** in writing to terminate automatic deduction

In Memory or In Honor

My gift is in loving memory of
Or in honor of: (Circle one)

_____ Please send an acknowledgement to:

Name _____

Address _____

_____ CITY

_____ ST

_____ ZIP