

Thank you for your donation!

NOTE: CREDIT CARD DONATIONS MUST BE MADE ONLINE at www.villagereach.org

Please send donation/check along with this form to:

VillageReach 2900 Eastlake Ave. E. Seattle, WA 98102

Donation Amount: \$_____

Monthly Giving Option:

□ YES! I would like to support VillageReach with a recurring monthly donation of: \$_____/Month

DONOR INFORMATION:

| First name: | | | | |
|-----------------------------|---------------------|-------------|-------|---|
| Last name: | | | | |
| Company (Optional): | | | | |
| Address: | | | | |
| City: | State: | | | |
| Zip/Postal Code: | | _Country: | - | |
| Email Address: | | | _ | |
| ACKNOWLEDGEMENT (op | tional): | | | |
| I would like to make a gift | | N MEMORY OF | | |
| NAME OF INDIVIDUAL | | | | |
| Please send acknowledge | ment of my donation | to: | | - |
| Address: | | | | |
| City: | State: | | | |
| Zip/Postal Code: | | _ Country: | - | |
| Personal note to include v | vith acknowledgemen | t: | | |
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