



Check Donation Form

Please mail the completed form to GiveWell with your check donation. Thank you!

Name _____

Email address _____ Phone # _____

Donation allocation. Please mark the appropriate box(es) to indicate how we should allocate your donation. If you would like to support multiple charities, please indicate the amount that you would like to be allocated to supporting each charity. Note that donor requests to grant donations to our recommended charities are subject to our approval (details on our grant approval process are available here: www.givewell.org/donate/more-information#allocationrequest).

- | | | | |
|----------------------|---|--|----------|
| Top charities | [| <input type="checkbox"/> Malaria Consortium (SMC program) | \$ _____ |
| | | <input type="checkbox"/> Against Malaria Foundation | \$ _____ |
| | | <input type="checkbox"/> Helen Keller International (VAS program) | \$ _____ |
| | | <input type="checkbox"/> New Incentives | \$ _____ |
| | | <input type="checkbox"/> Top Charities Fund | \$ _____ |
| | | <input type="checkbox"/> All Grants Fund | \$ _____ |
| | | <input type="checkbox"/> Unrestricted (likely GiveWell operating expenses) | \$ _____ |

If you would like to receive GiveWell's monthly newsletter, please check here:

Should we share your name and email address with the charity/charities you support? Yes No

Where did you hear about GiveWell? _____

We plan to send all donation receipts by email. If you would like to receive your receipt by mail instead, please check here and provide your mailing address:

Thank you for your generous support!

Please make checks payable to GiveWell. Contributions are tax deductible to the extent permitted by law. GiveWell is tax exempt under section 501(c)(3) of the Internal Revenue Code, Tax ID #20-8625442.