

# RESULTS Donor Form

*Donations to RESULTS are not tax-deductible*

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_(h) \_\_\_\_\_(w) \_\_\_\_\_(c)

Who Invited You? \_\_\_\_\_ Event/Group: \_\_\_\_\_

My company has a matching gifts program. Company Name: \_\_\_\_\_

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## ONE TIME DONATION

- I would like to make a **one-time donation** of \$ \_\_\_\_\_
- I authorize the above amount to be **charged to my credit card** (fill out credit card info below)
  - I have enclosed cash or a **check payable to RESULTS** (*not a tax deductible contribution*)

## MONTHLY SPONSORSHIP

- I would like to become a **sponsor with a monthly contribution** of \$ \_\_\_\_\_ a month
- I authorize the above amount to be **charged to my credit card** (fill out credit card info below)
  - I authorize the above amount to be charged via automatic electronic funds transfer (EFT) and have **enclosed a check for my first month's donation**
- I am a current monthly sponsor at \$ \_\_\_\_\_** and would like to **increase my contribution** to \$ \_\_\_\_\_ a month. (*Please include your credit card information below*)
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## CREDIT CARD INFORMATION

Please charge my donation to my (**circle one**): VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Cardholder's Name (as it appears on card) \_\_\_\_\_ Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

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**I would like more information about RESULTS/REF efforts to end poverty**

- Please invite me to one of your Monthly Action Meetings
- Please use my email address to sign me up for RESULTS/REF Action Alerts

***Thank you for your donation!***