



# Aid for Abused Children, Inc.

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## DONATION FORM FOR MAKING A SPECIAL OCCASION GIFT

THANK YOU for choosing the work of Aid for Abused Children to mark the value of someone you care about. Please print this two-page form, fill it out completely, and mail to:

Aid for Abused Children  
ID-GEN-A  
1535 Farmers Lane #200  
Santa Rosa, CA 95405  
Phone: (707) 483-2939

**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 *Aid for Abused Children*)

\_\_\_\_\_ 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:

Where most needed       Children's Homes       Feeding Programs  
 Education       Vocational Training  
 Other instructions or comments: \_\_\_\_\_  
\_\_\_\_\_

**Gift Card Message:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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