

## **MAIL-IN DONATION FORM**

Please print this form and complete the information below to ensure we can properly proces and acknowledge your gift.

Please note that Humanity First for Illinois does **not** accept gifts from corporations or from outside the United States.

DONOR INFORMATION		
Donor Name (Preferred Name and Last Name):		
Organization Name (Fill this out only if you're making your donation on	behalf of an organization):	
ADDRESS INFORMATION Address (If you're making this donation on behalf of an organization, please provide the company's address):		
City:	State:	Zip code:
Email (optional):		
Telephone Number (optional):		
By providing your email address and/or phone number, you will receive ways to get involved with the Humanity First for Illinois mission. You may		erts, donation needs, and oth
PAYMENT OPTIONS	OR Become a Monthl	y Champion!
One Time Gift Amount:		te the difference in Illinois.
☐ I'm enclosing my check made payable to Humanity First for Illinois ☐ Please charge my credit/debit card:	YES! Please bill my credit/debit card in the amount of \$ per month.	
☐ Visa ☐ MasterCard ☐ American Express ☐ Discover	the amount of \$	nake a monthly gift in using my checking
Cardholder's Name:	account. I've attache the account I would	ed a voided check from like to use.
Card Number:	Your monthly donation will be made each month from the payment option	
Expiration Date:	you selected. You may cancel or chan 1-773-217-9327.	ge this amount at any time by calling
WANT TO SUPPORT Please designate your gift to one of the following:		
Area of Greatest Need: Support the mission of Humanity First for Illinois.	Education: Help us get	the word out.
Research: Help us build the answer.	Advocacy: Help us be the difference.	
Other* (please specify):		
Please also indicate the name of the specific cause on the memo line of your check (for example: "Internship Program").		

\* If Humanity First for Illinois is not raising funds for the specific cause you have indicated and/or donations exceed Humanity First for Illinois expenses for that cause, your gift will be applied to Area of Greatest Need.

Your questions and feedback are very important to us. Please feel to contact us at humanityfirstil.org or call 1-773-217-9327. Thank you for your support.