

Columbia-Willamette WOMEN OF VISION CHRISTMAS GIFT

Thank you for sharing the hope and joy of Christmas with children in Bangladesh, Honduras, and Syria. Please return this sheet to Women of Vision, 316 NW 187th Avenue, Hillsboro, OR 97006.

DONOR INFORMATION

Name _____

Email _____

Address _____

City/State/Zip _____ Phone _____

MY GIFT for World Vision's work in Bangladesh, Honduras, and the Syrian impact area

- I would like to give a one-time gift of:
 - \$500
 - \$2,500
 - \$5,000
 - Other \$ _____

If you'd like to give your gift in honor of one or more special people in your life, please fill out the back of this sheet and we'll send a Christmas card of recognition to each one. (Amount will not be shared.)

I would like to give a monthly gift of \$ _____

Check made payable to World Vision/Women of Vision

Debit/Credit Card

Circle one: Visa MasterCard Discover American Express

Card number _____ Exp. date _____

Name on card _____

Please check this box for recurring gifts only: I authorize the amount specified above to be paid to World Vision, Inc. from my debit/credit card.

I understand this authorization shall remain in effect until I notify the credit card issuer and World Vision, at least 30 days prior to the upcoming transfer; that I wish to end this agreement. I understand my credit card issuer may impose additional requirements and I should contact the credit card issuer for further information. A record of my contribution will appear on my debit/credit card statement.

Signature (required for both one-time and monthly recurring credit card transactions)

World Vision is committed to donor privacy and does not rent or sell our mailing lists. We may disclose some donor information to select third parties in order to more effectively target our fundraising communications.

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