

# PRINT & SEND DONATION FORM



Please mail your tax-deductible gift with this form to:

**Action Against Hunger – USA Donations**  
247 West 37<sup>th</sup> Street, 10<sup>th</sup> Floor  
New York, NY 10018

## Gift Amount (please check one)

\$1,000    \$500    \$200    \$100    \$50    Other Amount: \_\_\_\_\_

## Yes! I want to support Action Against Hunger's lifesaving work around the world every month.

Charge my credit card this amount every month to sustain my commitment (which can be cancelled at any time).

## Billing Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Yes, I would like to receive email from Action Against Hunger.

## Payment Options

I have enclosed a check made payable to Action Against Hunger.

I would like to charge my gift to the following credit card:

Card Type: Visa / MC / AMEX / Discover   Card Number: \_\_\_\_\_   CVV: \_\_\_\_\_

Card Expiration (MM/YYYY): \_\_\_\_\_   Signature: \_\_\_\_\_

## Honor/Memorial Gift (optional)

If you'd like to make this contribution in someone else's honor, please let us know the honoree's name.

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

## Matching Gift (optional)

I have enclosed my employer's matching gift form.

## Thank you for your support!

You will receive an acknowledgment for tax purposes in the mail within two to four weeks.

Action Against Hunger is a 501(c)(3) not-for-profit organization recognized by the IRS,  
and your gift is tax-deductible to the full extent of the law.