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| BUSINESS NAME | NAME (LAST, FIRST, M.I.) |
| STREET ADDRESS  | EMAIL |
| CITY, STATE, ZIP | PHONE |
| COUNTRY: | I’d like to receive occasional email updates Yes\_\_\_\_ No\_\_\_\_\_ |

**Amount Enclosed:** $ \_\_\_\_\_\_\_\_\_\_\_\_

 [ ]  Sponsor-a-Child sponsorship (Avg $120 per year per student 4st-12th grade)

 [ ]  School Supplies Package ($15 each)

 [ ]  Where needed most

 [ ]  Operation Expense

 [ ]  All of Above

**Payments:**

 [ ]  Direct Zella or Paypal: donation@perspectivecharity.org

 [ ]  Check/Money Order: P.O Box 90094. Austin, TX 78709

 [ ]  Visa/Mc/Amex – Card#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp\_\_\_\_\_ CVC \_\_\_\_ Zipcode: \_\_\_\_\_\_

**DONATE IN HONOR OF SOMEONE** (Optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Note: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Thank you for your great generosity! We, at Perspective Charity, greatly appreciate your donation. If you have specific questions about our mission be sure to visit our website [www.perspectivecharity.org](http://www.perspectivecharity.org).

Best Regards,

**Perspective-Charity-Team**
**Our commitment to Donors:** We will not sell, share or trade our donors’ names or personal information with any other entity, nor send mailings to our donors on behalf of other organizations. This policy applies to all information received by Perspective Charity, both online and offline, as well as any electronic, written, or oral communications.