

Please accept my tax-deductible contribution of \$ _____ to support the work of CrisisLink.

CONTACT INFORMATION

I would like this gift to remain anonymous.

Name: _____

Street Address: _____

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GIFT DEDICATION (optional)

This gift is in (circle one) **Memory / Honor** of _____.

Please notify _____ of this gift at the address below:

PAYMENT INFORMATION

Enclosed is my check, made payable to CrisisLink.

Please charge my donation to my credit card.

Credit Card No.: _____ Expiration Date: _____

I authorize CrisisLink to charge the amount indicated at the top of this page to my credit card.

Signature: _____

I prefer to make my gift in the form of a transfer of stocks or securities. Please contact me directly at the telephone number above.

Please return this form to:

Attn: Development Dept.
CrisisLink
2503-D N. Harrison St. #114
Arlington, VA 22207

*CrisisLink is a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code. Tax ID#: 23-7111680.
All donations are tax deductible to the full extent of the law.*

Thank you for your generous support!