



DONATION FORM FOR SENDING YOUR GIFT BY MAIL

THANK YOU for partnering with us in our work. Please print this form, fill it out completely, and mail to:

**Aid for Starving Children
ASC -Web
P.O. Box 2156
Windsor, CA 95492**

Amount of Gift: \$ _____

___ One-time gift. ___ Monthly gift. _____ Other.

Method of Payment:

___ Check or Money Order (Please make your check payable to Aid for Starving Children)

___ Credit Card Type: ___ VISA ___ MasterCard

Authorized signature: _____

Credit Card Number: _____ Expiration Date: _____

CVV# _____

Personal Information:

Name: _____

Address: _____ City: _____

State: _____ Zip: _____ E-mail: _____

Donation Instructions:

Please use my gift for the following:

___ Where most needed ___ Children's Homes ___ Feeding Programs

Thank you! Your gift is tax deductible as allowed by law.