



MAIL-IN DONATION FORM

To make a donation by mail, complete this form, print it, and mail it to Outreach International at:
Outreach International, PO Box 210, Independence, MO 64051-0210

DONOR INFORMATION

FIRST NAME: _____ **LAST NAME:** _____
Company/Organization (if applicable): _____
Address Line 1: _____
Address Line 2: _____
City: _____ **State:** _____ **Zip/Postal Code:** _____

GIFT INFORMATION

DONATION AMOUNT (check one):

- \$50
- \$100
- \$250
- \$500
- \$1,000
- Other Amount (\$) _____

PAYMENT TYPE (check one):

- Check/Money Order (please attach to form)
- Visa
- Master Card
- American Express
- Discover

Credit Card Number: _____ **Expiration Date (mm/yy):** _____
Cardholder Name Printed: _____ **CVV:** _____
Cardholder Signature: _____ **Phone:** _____

BILLING INFORMATION

If the billing information is the same as the Donor Information above, please check the box below. If not, please enter your correct billing address below.

Billing address is same as my Donor Information

Address Line 1: _____
Address Line 2: _____
City: _____ **State:** _____ **Zip/Postal Code:** _____

SIGN UP

RECEIVE EMAIL UPDATES ABOUT OUTREACH INTERNATIONAL'S PROGRAMS.

Yes, sign me up! No, thank you.

E-mail Address: _____