



RIVERS OF HOPE

Advocates for Ending Family Violence

I have enclosed a check/money order payable to Rivers of Hope

I would like to set up a recurring gift of \$ _____ per month for a total annual pledge of \$ _____. Enclosed is a voided check or voided savings deposit ticket.

I'd like to make a pledge of \$ _____. Please bill me on ____/____/____

Please charge my gift to my: MasterCard Visa

Amount of Gift: \$ _____

Credit Card #: _____

Exp. Date: ____/____/____

(Please do not send your credit card information via email).

Gift given by:

Name (as you wish it to be published in our annual report):

Mr./Ms./Mrs. _____

(If applicable) Company: _____

Position/Title: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Telephone: Home _____

Work _____

Email address: _____

Gift given in honor memory of:

Name: Mr./Ms./Mrs. _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Please save money; don't acknowledge my gift by sending a thank-you note.

I wish to remain anonymous.

Yes! Please send me information, event notices, volunteer opportunities & requests via email.

Thank you for supporting Rivers of Hope. Your gift is greatly appreciated and tax-deductible to the extent allowed by law.

Rivers of Hope
PO Box 511
Monticello, MN 55362