

MY GIFT

YES, I want to help. Please use my gift to provide community services to children and families facing financial instability in Orange County.

Gift type: Cash Check Credit Card \$15 \$25 \$35 \$50 Other \$ _____

Designated Program: Title III-B—Older American Act Services

Program Specified _____ Any—unrestricted

I would like to join Abrazar, Inc. and give monthly

My first gift of \$ _____ is enclosed.

Please charge my credit card. (See back of form)

Name: _____

Street address: _____

City, State, Zip: _____



Please make your check payable to:

ABRAZAR, INC.

Give now at: www.abrazarinc.com or call 714-278-4670

PLEASE RETURN THIS SLIP WITH YOUR GIFT TO

MARIO A ORTEGA, CEO | ABRAZAR, INC.

7101 WYOMING ST

WESTMINSTER, CA 92683-3811

Your gift changes lives!

Other ways to help:

- Volunteer your time
- Donate wish list items
- www.abrazarinc.com/Donate.html

Call (714) 278-4670 for more information

Please charge my gift on my credit card: VISA MC AMEX DISC

Card Number

Security Code

Exp. Date

Name on Card

Amount

Signature

Telephone Number

Name (please print)

To charge your gift by phone, please call (714) 278-4670, or give only at www.abrazarinc.com

Tax ID: 33-0301538