



Donation Form

☐ Yes! I want to create healthy families and safe communities by supporting Peacemakers Inc.

Personal Information

Name _____
(first and last name as it appears on card / account)

Address _____

City, State, Zip _____

Email _____

Amount of Donation

- ☐ Peacemaker - \$5,000+ ☐ Peace & Love - \$100
☐ Peace Giver - \$1,000 ☐ Other
☐ Peace Advocate - \$500

Please send notification of my contribution to:

Name _____

Address _____

City, State, Zip _____

Email _____

Your gift amount is confidential and will not be mentioned.

Method of Payment

☐ I have enclosed my check made payable Peacemakers Incorporated

☐ Please charge my check card:

☐ Visa ☐ Master Card ☐ Amex ☐ Discover

_____ Exp. _____ CVV _____

☐ *Stock/securities (stock transfer instructions available by calling 510-347-4620)*

☐ Please accept my (please circle one): one-time | quarterly | annual

Pledge of \$ _____ to be paid by _____

Special Instructions _____

Signature _____

Thank You

Your donation support helps us provide our programs and services in your local community.

3081 Teagarden Street San Leandro, CA 94577

| P 510-347-4620

| PeacemakersInc.us