



I will give the **gift of hope** to a child with a donation of:

- | | | | |
|---|---------------|--------------------------------------|-----------|
| <input type="checkbox"/> \$1,500 & over | Voice of Hope | <input type="checkbox"/> \$250–499 | Defender |
| <input type="checkbox"/> \$1,000–1,499 | Guardian | <input type="checkbox"/> \$100–249 | Protector |
| <input type="checkbox"/> \$500–999 | Advocate | <input type="checkbox"/> Under \$100 | Friend |

My gift of \$_____ will be paid by:

- Check (*payable to Voices for Children*) Credit Card: MasterCard Visa Discover

Name on Credit Card _____ Account Number _____

Expiration Date _____ Security Code (*3 digits on back*) _____

Address _____ City _____ State _____ ZIP _____

Signature _____

Phone Number _____ Email _____

Name/s as you would like it to appear in publications: I/we prefer to remain anonymous

My employer _____ may match my donation (retirees are often eligible).

- Enclosed is the company matching gift form for my donation.

Given in honor or memory of _____

for _____.

Please notify the following person/s of my gift: Name _____

Address _____

City _____ State _____ ZIP _____

Please contact me about:

- Setting up a recurring donation (monthly, quarterly) Making a stock donation
 Planned giving Tax credits Volunteer opportunities Other _____

Mail your donation to:

Voices for Children
Jo Curran, Development Director
920 North Vandeventer
St Louis, MO 63108

Voices for Children is a 501(c)3 nonprofit agency and all charitable gifts are tax deductible as allowed by law.