



Thank you for your donation!

NOTE: CREDIT CARD DONATIONS MUST BE MADE ONLINE at www.villagereach.org

Please send donation/check along with this form to:

VillageReach
2900 Eastlake Ave. E. Seattle, WA 98102

Donation Amount: \$ _____

YES! I would like to make this a recurring monthly donation and support wounded service members with my monthly gift of: \$ _____/Month

DONOR INFORMATION:

First name: _____

Last name: _____

Company (Optional): _____

Address: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Email Address: _____

ACKNOWLEDGEMENT (optional):

I would like to make a gift IN HONOR OF IN MEMORY OF

NAME OF INDIVIDUAL _____

Please send acknowledgement of my donation to: _____

Address: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Personal Note to include with acknowledgement:
