



Donation Form: Action Fund

Thank you for your interest in supporting the Tobacco-Free Kids Action Fund. Your non-tax-deductible gift is very much appreciated. Please print out this form, fill it out and return it to the Action Fund by mail or fax using the contact information listed below.

Donation Information

\$1,000 \$500 \$250 \$100 \$50 \$25 Other: \$

*\$10 of your contribution will go towards membership dues.

Your Information

Name:

Mailing Address:
Phone:
E-Mail:

Payment Information

My check, payable to "Tobacco-Free Kids Action Fund" is enclosed
 Visa MasterCard American Express Discover

Credit Card Number **Expiration Date:**

Name on Card:

Billing Address: **Signature:**

Is This a Tribute Gift?

This gift is made: in honor of ... in memory of ...

Name:

Please send an acknowledgement note on my behalf to:

Name:

Mailing Address:

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Development Department, Tobacco-Free Kids Action Fund, 1400 I St., NW, Suite 1200, Washington, DC 20005
(202) 296-5469 | Fax: (202) 296-5427 | tobaccofreekids.org