

## **Mail-in Donation Form**

To donate to Easterseals Hawaii by mail, print and complete this form, and mail to:

**Easterseals Hawaii** Attn: Development Team 710 Green Street Honolulu HI 96813

## Donate today and help us create a more equitable world so individuals with developmental disabilities can choose their path!

Name:				Billing Address:			
City:			_ State/Province:			Zip/Posta	al Code:
Country:		_ Phone	Phone*:		_ Email: _		
Please email me news and information about Easterseals Hawaii.							
Preferred Format:		HTML Plain					
*Please provide phone should we have problems or questions in processing your donation.							
Enclosed is my tax-deductible gift of:							
\$500	) \$100 \$50 \$25 Othe						
Check enclosed (Make check payable to: Easterseals Hawaii)							
Please charge my:							
VISA	Discover Ameri		rican Express Ma		Mastercard		
Credit Card #: _					CVC:	Expiratio	on:
Signature:					Date:		
						1	

Once your donation has been processed, Easterseals Hawaii will e-mail you a receipt for your records.

## **Thank you!** Your generosity improves the lives of people with disabilities and their families.