



# Donation Form

Please print this form and complete the information below to ensure proper preparation of your tax receipt (please print clearly).

**Please mail this completed form to:**

The Century Foundation, ATTN: Development, One Whitehall Street, 15th Floor, New York, NY 10004

## Donor Information

Name \_\_\_\_\_

Organization Name \_\_\_\_\_

Address \_\_\_\_\_ Apt/Unit \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_  Home  Mobile  Work

Email \_\_\_\_\_

## Payment Information

Enclosed is my check for: \$ \_\_\_\_\_ Checks payable to The Century Foundation

Please charge my gift of: \$ \_\_\_\_\_

Mastercard  Visa  Discover  American Express

Card # \_\_\_\_\_ CCV \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing information is same as above

Address \_\_\_\_\_ Apt/Unit \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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