

Please print this form and mail it with your pledge gift to
Planned Parenthood® Association of Hidalgo County- 916 E. Hackberry McAllen, TX 78501

2009 General Donation: \$ _____

Title _____ Name _____

Address _____ City/ST/Zip _____

Home: _____ Work: _____ Cell: _____

Email: _____

- Please Check One -

I prefer to make a monthly gift of \$ _____ to begin on _____ (day) of _____ (month) 2009.

Savings Account # _____ Bank Routing # _____

Checking Account # _____ Bank Routing # _____

I prefer to make a one time donation by:
_____ Check or Money Order (made out to "PPAHC")
_____ CASH

I prefer a monthly gift from my credit card of \$ _____ to begin on _____ (day) of _____ (month) 2009.

_____ American Express _____ Discover _____ MasterCard _____ Visa

Credit Card # _____ Exp. Date _____

I authorize for Planned Parenthood to continue my charge unless notified otherwise.

As a Planned Parenthood employee, I authorize to payroll deduct \$ _____ (amount) from each paycheck in 2009 until my donation of \$ _____ is met.

Acknowledgement of Donation...

I understand that my donation is tax deductible as allowed by law in the state of Texas.

Signature _____ Date _____

Thank you for your generous gift!

Questions: Vivian Vargas, Development Director ph: 688-3706 f: 688-3791