



## Financial Donation Form

---

**Yes-** I want to partner with Food for Others in the fight against hunger in Northern Virginia. Here is my tax-deductible gift.

**Please fill in the form below and fax or send it to:**

Food for Others  
2938 Prosperity Avenue  
Fairfax, VA 22031  
Fax: 703-207-9204  
Phone-703-207-9173

**My Gift:**  \$25  \$50  \$75  \$100  Other: \$

**Contact Information:**

Name:

Address:

City/State/Zip:

Phone:

Email:

**Payment Options:**

Enclosed is my check or money order made payable to Food for Others.

I wish to donate by credit card. Below is my credit card information.

Visa  Mastercard

Card number (16 digits):

Expiration (mm/yy)

3 digit security code

Cardholder Name:

Cardholder signature:

My employer has a Matching Gift Program. Enclosed with my donation is my company's form.

The gift is (please check one):

In honor of:

In memory of:

Please notify:

Name:

Address:

City/State/Zip:

**Privacy Policy:** Food for Others respects the privacy of our donors and we will not sell or trade a donor's personal information to any other entity without the express permission of the donor.