

# DEVELOPMENT CAMPAIGN DONOR INFORMATION

Name \_\_\_\_\_ Email \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Business phone \_\_\_\_\_

I've enclosed a check for \$\_\_\_\_\_ payable to EDGE OUTREACH. *(Gifts are tax-deductible to the extent provided by law.)*

Please charge my credit card:  Visa  MC  AX Signature \_\_\_\_\_

Credit card number \_\_\_\_\_ Expiration date \_\_\_\_\_ CSC# \_\_\_\_\_  
(3 digit # on back of card)

Please make my gift monthly by automatic payment for \$\_\_\_\_\_. *(Call D.E. Adams at 502-568-6342 to set this up.)*

To make Direct Transfer of Stock, please call Rick Shafferman, AAMS, at Edward Jones, 502-893-6898.

1500 Arlington Avenue • Louisville, Kentucky 40206 • Telephone 502.568.6342 • [edgeoutreach.com](http://edgeoutreach.com)

