



Personal

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Work

Company: _____ Position: _____

Address: _____

City: _____ State: _____ Zip: _____

☐ **I would like to receive updates from Whitman-Walker Foundation.**

I would like to support Whitman-Walker Foundation at the following level:

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> \$50 | <input type="checkbox"/> \$1,000 |
| <input type="checkbox"/> \$100 | <input type="checkbox"/> \$2,500 |
| <input type="checkbox"/> \$250 | <input type="checkbox"/> \$5,000 |
| <input type="checkbox"/> Other amount \$_____ | <input type="checkbox"/> \$10,000 |

☐ I am interested in setting up a **monthly gift** at \$_____/month.

☐ I am interested in information on planned gifts to the Whitman-Walker Foundation.

Please make your check payable to the **Whitman-Walker Foundation**, or charge your gift to:

☐ American Express ☐ VISA ☐ Mastercard ☐ Discover

Card Number _____ Exp. _____ Security code: _____

Cardholder's signature _____

Please return this form, along with your donation to:

Whitman-Walker Foundation
Attn: Gift Processing
1201 Sycamore Dr. SE
Washington, DC 20032

For additional information, please contact: Charles Hastings, Foundation & Special Programs Manager, at CHastings@whitman-walker.org or call (202) 803-6468.

Thank you so much for your generous support. Whitman-Walker Foundation is a 501©(3) nonprofit as determined by the IRS. Our Federal Tax ID is **82-3889980**.