



DONATION FORM

YES, I want to support the Carter Center's efforts to wage peace, fight disease, and build hope around the world. Enclosed is my donation in the amount of:

\$25 \$35 \$50 Other \$ _____

Name _____

Address _____

Country _____

Email _____

Phone _____

I have enclosed my corporate matching gift form.

ENCLOSED IS MY CHECK. OR,	
PLEASE CHARGE MY GIFT TO MY:	
Visa	Master Card AMEX Discover

Credit Card #	

Print name as it appears on card	

Exp. Date	Signature (Required)
_____	_____

My Gift is	In Honor	In Memory of:

Please print name		

for	_____	
Occasion		

Please notify the following person of my gift:		
Name _____		
Address/Country _____		

**Thank you for
your support!**

Please mail this completed form along with your check (if applicable) to:

The Carter Center
Attn: Office of Development
One Copenhill
453 John Lewis Freedom Parkway NE
Atlanta, GA 30307

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