

DONOR INFORMATION

(please PRINT all information)

Name _____ Date _____

Company (if applies) _____

Address _____

City _____ State _____ ZIP Code _____

Billing Phone No. _____ Email Address _____

Enclosed is my check in amount of \$_____ . _____ (please make payable to: **Less Alone Endeavor**)

Mail receipt Email receipt No receipt needed (mark **one** for checks or credit card payments)

CREDIT CARD INFORMATION

(Prefer PAYPAL? Donate online!)

Please charge my credit card for \$_____ . _____ VISA MasterCard Discover AMEX

Automatic Recurring Contribution – to be Deducted on the – 1st of the month 15th of the month

One-Time Contribution Monthly Every 3 months

Credit / Debit Card Number _____ Exp. Date ____/____

CCV Number _____ (4-digit number for AMEX – 3-digit number for all other cards)

Name as shown on card _____

Signature authorization _____

CONTRIBUTION INFORMATION

(Your contribution is so greatly appreciated!)

Please split my contribution to the following –

LAO General (Operating) Fund _____ %

Membership Outreach (Advertising) _____ %

LAO Payrolls & Employee Benefits _____ %

LAO Website, IT & Development _____ %

LAO Local Chapters Development _____ %

100 %

Mail to *DIRECTOR* at this address:

LESS ALONE ENDEAVOR
PO Box 1896
Elephant Butte, NM 87935

FAX phone (toll-free) 877-374-6798
Email (PDF only) director@lessalone.org

Advantages of donating online at our website –

- ★ Use a PAYPAL account for your donation
- ★ Donation totals at-a-glance, year-to-year
- ★ Receive annual statement for your tax prep