



Yes, I want to help connect consumers, businesses, and nonprofits and be a part of raising \$90 million per year for causes we all care about!

Name (first and last): _____

Address 1: _____

Address 2 (ste, apt, etc.): _____

City: _____ **State:** _____ **Zip:** _____

Phone Number: () _____ - _____

Email: _____

Give Back 24/7 is a pending 501(c)(3) non-profit organization. No goods or services are provided in connection with this donation. Your donations are tax deductible to the extent allowed by law. No contributions will be transacted until the foundation process is complete.

Monthly Amount (recurring charge):

\$10 \$20 \$50 \$100 Other: _____

One Time Gift:

\$100 \$250 \$500 \$1000 Other: _____

Check Card (fill out form below)

Make checks payable to: Give Back 247 Foundation

Name on card: _____

Card #: _____

Exp. ____ / ____ Code: _____ Zip _____

Signature _____