



# Donation Form

## Donor Information

Mr. Mrs. Ms. Dr. Other \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone Number: (H) \_\_\_\_\_ (w) \_\_\_\_\_

E-mail \_\_\_\_\_

## Gift Information

Amount: \$ \_\_\_\_\_ Cash      Check      VISA      MasterCard

Name on Credit Card \_\_\_\_\_

Billing Address \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

## Honorarium and Memorial Information

To designate your gift for an individual or group, please complete the following:

In Honor of: \_\_\_\_\_

In Memory of: \_\_\_\_\_

Please mail acknowledgement card to:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

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

## When completed, please mail to:

Habitat for Humanity of Williamson County, P.O. 737, Georgetown, Texas 78626

If you have questions, please call (512) 863-4344. Thank you for your support!