



Donate By:

- CHECK / MONEY ORDER
- CREDIT CARD

Just print, fill out, and mail!

Here is my tax-deductible gift to MVEF

P.O. Box 391557, Mountain View, CA 94039-1557

650.399.0266 contact@mvef.org

Federal Tax ID #77-0006770

Name _____

Address _____

City/State/Zip _____

Phone _____

Email_ _____

School(s) / Grade(s) _____

The suggested per child donation is \$800 but every gift is welcome and matters!

Enclosed is my check or money order in the amount of:

___\$5,000 ___\$2000 ___\$1600 ___\$800 Other \$_____

Please charge my credit card in the amount of \$_____

OR I authorize 10 monthly charges of \$_____

Credit Card Information: ___ VISA ___ Mastercard

Card Number _____ Exp.Date_____

Name on card _____ CVV_____

Signature _____

___ Please contact me, I would like to get involved with MVEF!

Thank you for your support! Together we make our schools great!