



Mail-In Donation Form

Please complete this form in its entirety, print, and mail in to the listed address below.

DONOR INFORMATION

First Name: _____ Last Name: _____

Company/Organization (if applicable): _____

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Zip/Postal Code: _____

Country: _____ Primary Phone #: _____

Email Address: _____

GIFT INFORMATION

Donation Amount (check one):

- \$25
- \$50
- \$100
- \$200
- \$500
- Other Amount (\$) _____

Payment Type (check one):

For **checks** or **money orders** please make payable to:

One House, Inc.
116 Franklin Street
Selma, AL 36703

- Check/Money Order (please attach to form)
- Visa
- Master Card
- American Express
- Discover

Credit Card Number: _____ Expiration Date (mm/yy): _____

Cardholder's Name (as it appears on the card): _____

Your generous contribution(s) will help support lifesaving work

One House, Inc is a 501(c)(3) organization recognized by the IRS and all contributions are tax deductible.