



## DONATE TODAY

Your tax-deductible gift will end suffering for people in need, providing vital sight-saving eye care to children and adults around the globe.

### Step 1: Your Donation

- \$25     \$50     \$100     \$500     \$1000     \$5000  
 Other \$ \_\_\_\_\_ (We can only accept donations in U.S. currency)

### Step 2: Contact Information (Fields with \* are required)

Title \_\_\_\_\_ First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_  
Billing Address 1\* \_\_\_\_\_  
Billing Address 2 \_\_\_\_\_  
City\* \_\_\_\_\_  
State/Province\* \_\_\_\_\_ Zip/Postal Code\* \_\_\_\_\_  
Country \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

### Step 3: Select Payment Method

- Check: Enclosed (please make checks payable to "Seva Foundation")  
 Credit Card: Visa / Discover / American Express / MasterCard (circle one)

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

- This is a one-time gift  
 I would like this to be a monthly gift  
(Voided check or credit card information enclosed)

### Step 4: Please mail this completed form and payment to:

Seva Foundation  
1786 Fifth Street  
Berkeley, CA 94710