

Yes, Count Me In!

Please find enclosed my donation in the amount of

\$ _____

Or I would like to make a pledge in the amount of

\$ _____ payable in _____ installments

beginning _____.

All donations are greatly appreciated and are tax deductible.

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

Email: _____

Form of payment: Check or Credit Card

Credit Card Information

Name on card:

Visa/Master Card/Discover #:

CCV #: _____ Expiration Date: _____

Billing Address:

City/State/Zip Code: _____

Daytime Phone: _____

Email Address: _____

Cardholder's signature required

Please make check payable to:
Project GRAD Akron
400 W. Market Street
Akron, OH 44303-2060

For more information, please call
(330) 761-3113 or email
info@projectgradakron.org

