



Donation Form

Name(s): _____

Address: _____

Phone: _____

Email: _____

- Provide **500** people.....\$500
- Provide **250** meals.....\$250
- Provide **100** meals.....\$100
- Provide **50** meals.....\$50
- Other.....\$_____

Payment Options

- My check is enclosed, made payable to **Aloha Harvest**
- Cash
- Please charge my MasterCard Visa American Express Discover

Card #: _____ Exp.: _____ CSV code: _____

Signature: _____ Date: _____

(required for credit card transactions)

THANK YOU for your gift!

Your donation is tax deductible to the full extent of the law. You will receive a return acknowledgement. Aloha Harvest is a 501(c)(3) non-profit organization. Federal ID #99-0344209