

## Donor Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company / Group Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

My gift is:  in honor of: Name: \_\_\_\_\_

in memory of: Name: \_\_\_\_\_

Please notify: Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Yes, Please include me on emails and mailings regarding the Haymarket Regional Food Pantry

## One Time Gift:

One-Time Gift Amount:  \$2,000  \$1,000  \$500  \$250  \$100  \$25  Other: \$ \_\_\_\_\_

Enclosed is my check. (Please make checks payable to "Haymarket Regional Food Pantry")

## Recurring Gifts:

Recurring Gift Amount:  \$100  \$75  \$50  \$25  \$10  Other: \$ \_\_\_\_\_

Automatically transfer

I authorize

authority via

Authorized

Routing #:

Account #:

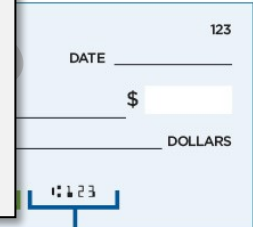
I understand that this

authorization.

Date: \_\_\_\_\_

Yes, I have attached a voided check.

All recurring donations must be made  
via our website. Please go to  
[www.HaymarketFoodPantry.org](http://www.HaymarketFoodPantry.org)  
and click on Donate.



Routing  
Number

Account  
Number

Check  
Number

## Please send completed form to:

Haymarket Regional Food Pantry

P.O. Box 132

Haymarket, VA 20168

To charge your one-time or recurring gift to a credit card, please go to our website:

[www.HaymarketFoodPantry.org/donate/](http://www.HaymarketFoodPantry.org/donate/)

The Haymarket Regional Food Pantry is a tax-exempt, non-profit organization,  
in accordance with section 501(c)(3) of the IRS Code.