ND Choose Life
Donation Form

Yes! I'll help! Enclosed is my gift of:

☐ $1,000 ☐ $500 ☐ $250 ☐ $100 ☐ $50 ☐ $25 Other $ _____

☐ I will make a recurring monthly contribution through November 2014 of $ _____

Check Donations

Please make your check payable to ***ND Choose Life*** *and mail this form and your check to:*

ND Choose Life
PO Box 1351
Bismarck, ND 58502-1351

Credit Card Donations

(Please note there is a $10.00 minimum donation)

Type of credit card: ☐ Visa ☐ MasterCard ☐ American Express

Card Number: ___/___/___/___/ ___/___/___/___/ ___/___/___/___/ ___/___/___/___/ Expiration Date: ___/___/ (Month) ___/___/ (Year)

Name as it appears on the card: _____

Address as it appears on billing statements: _____

City: _____State: _____ Zip: _____

Your signature: _____Date:_____

Please provide the following information so we may accept your gift.

All fields marked with an asterisk (*) are required by North Dakota Law. Donors of $100 from outside North Dakota must complete all fields marked with a hash mark (#).

I certify the following information:

*#Full name of Individual, Company or Organization

*#Mailing address

*#City *#State *#Zip

Phone number Fax number E-mail Address

#Your Occupation #Your Employer (If self-employed, enter name of business) #Your Place of Business

I will also help by:

☐ Volunteering/speaking at events
☐ Placing a newsletter article
☐ Posting a link on our Web site
☐ Displaying a yard sign/bumper sticker
☐ Distributing materials
☐ Writing a letter to the editor

Thank you for your donation!

Contributions to ND Choose Life are not tax deductible. Corporate, business, PAC and personal checks are acceptable. There is no limit on the amount of contributions. State election law requires us to publicly report cumulative contributions of $100 or more. Questions? Call (701) 388-4966

Paid for by ND Choose Life
www.NDChooseLife.com