



Please print and fully complete this form.

1 Your information:

Name: _____

Additional name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ E-mail address: _____

Date: _____

2 Please indicate:

Enclosed is my check for \$_____.

Please charge my gift of \$_____ to the credit card selected below.

VISA MasterCard American Express Discover

Account number: _____ Expiration date: _____

Name as it appears on card (*please print*): _____

Signature (*required*): _____

Please make checks payable to **Southern Poverty Law Center**. Southern Poverty Law Center is a 501(c)(3) tax-exempt organization. Gifts to the Center are fully tax-deductible. No goods or services are ever sent in exchange for gifts.

3 Mail this form, along with your donation, to:

Southern Poverty Law Center
400 Washington Avenue
Montgomery, AL 36104

Thank you!

Your gift will make a difference in our work for tolerance and justice. We appreciate your support.