



## **Wimauma Community Development Corporation Gift Form**

I would like to donate the following amount \$ \_\_\_\_\_

**Donate by Check:** please mail your check to the address in the above right corner.

**Donate by Credit Card:** please provide us with the following information:

(Check which type of Credit Card)

MasterCard       Visa       Discover Card       American Express

Credit Card number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_

### **Please provide the following information in full:**

Name: \_\_\_\_\_

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

\_\_\_\_\_

City	State	Zip/Postal Code	Country
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Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Wimauma CDC 501(c)3 Status information:

FEI/EIN Number: 51-625060

**\*\*You will receive a written acknowledgement of your gift with a receipt in the mail soon. Thank you!**