

Financial Gift Form

Please complete this form and mail it with your contribution to:

Hunger Task Force

5000 W. Electric Avenue

West Milwaukee, Wisconsin 53219



Enclosed is my gift of: \$1000 \$750 \$500 \$250 \$100 Other \$ _____

Name _____

Company _____
(if donation is from a company/organization)

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Interested in making a monthly gift?

Would you like to help fight hunger year round? Visit www.HungerTaskForce.org to make a monthly contribution via credit card or connect with your bank to set up a recurring payment via check.

Please indicate:

Check is enclosed (Please make check payable to Hunger Task Force.)

Gift will be matched by _____ Form enclosed
(Company/Foundation)

Please charge to (circle card type) **Visa** **Mastercard** **Discover** **American Express**

Account # _____ Expiration ____/____ CVV _____

Name on card _____

Signature _____ Today's Date _____

Please apply my gift toward the following program (check all that apply):

- Wherever the need is greatest (unrestricted)
- Emergency Food Programs
- Hunger Task Force Farm
- Education and Advocacy Outreach Programs

In honor of: In memory of:

Card to _____

Address _____

Your gift to Hunger Task Force is tax deductible as allowed by law.

Questions? Call 414.777.0483