

Yes—I want to help support people in Jefferson and Clallam Counties

Name _____ Email _____

Address _____ State/Zip _____

Enclosed is my check for: (*Please make checks payable to OlyCAP*)

\$35 _____ \$50 _____ \$100 _____ \$500 _____ \$1,000 _____ Other _____

Please bill my credit card for a one-time gift of:

\$35 _____ \$50 _____ \$100 _____ \$500 _____ \$1,000 _____ Other _____

Please bill my credit card monthly for the amount of:

\$15 _____ \$25 _____ \$50 _____ \$250 _____ \$500 _____ Other _____

Card Number _____ Visa Master Card Exp. Date ____/____

Signature 3-Digit Security# _____ Phone # _____

****All information in this box is required for credit charges

Please check here if you are interested in receiving information on planned giving.

Please check here if you prefer to remain anonymous

Thank You!

Your support will make a difference for people right here in our community

Olympic Community Action Programs is a 501(C) (3) nonprofit organization and your donation is tax deductible

Please mail to:

OlyCAP

**823 Commerce Loop
Port Townsend, WA 98368**