

Community Change
Document Processing Center
POBOX5685 Fredericksburg, VA 22403

Please mail this form with your check or credit card information to Community Change at the above address. For more information, call 202-339-9365.

## YES! I want to build power from the ground up!

<b>\$100</b>	<b>\$250</b>	<b>\$500</b>	<b>\$1,000</b>	Other: \$		
Name:				I WANT TO LEARN MORE:		
Address:				☐ Please add me to your e-newsletter list.		
City: State: Zip:				☐ I would like information regarding planned giving opportunities.		
Phone:						
Email:						
I WANT TO GIVE:				I WANT TO SUPPORT:		
$\ \square$ Enclosed is my check payable to Community Change or Community Change Action.				☐ Community Change  A 501 (c)(3) tax-exempt organization.  All donations are tax-deductible to the		
☐ Please charge my credit card:						
☐ Mastercard 【	□ Visa □ Discover □	American Express		fullest extent of the law.		
Card Number:				☐ Community Change Action		
Exp. Date:		CVV:		A 501 (c)(4) advocacy organization.  Donations are not tax-deductible.		
Name on Card:				GIVE ONLINE AT:		
Signature:				communitychange.org/donatenow		
Billing Address if	different from above:			communitychangeaction.org/donatenow		
				Thank You!		