

YOUR INVESTMENT

I/We would like to invest in the **Children's Trust of South Carolina** and contribute to community-based programs that prevent child abuse, neglect and unintentional injuries.

INVESTMENT LEVELS

- CHAMPION** (\$10,000 +) **HERO** (\$2,501 - \$5,000) **FAMILY** (\$1,001 - \$2,500) **PARTNER** (\$501 - \$1,000)
 MENTOR (\$201 - \$500) **FRIEND** (\$100 - \$200) **OTHER** \$ _____

PAYMENT OPTIONS

- VISA® MASTERCARD® AMERICAN EXPRESS® DISCOVER®

NAME ON CARD: _____ AMOUNT: \$ _____

CARD NUMBER: _____ EXPIRATION DATE: _____

- CHECK AMOUNT: \$ _____ (Payable to The Children's Trust of South Carolina)

DEDICATION INFORMATION

PLEASE MAKE MY GIFT:

- IN HONOR OF: _____ IN MEMORY OF: _____
 GENERAL DONATION

ADDRESS OF NAME ABOVE: _____

CITY: _____ STATE: _____ ZIP CODE: _____

- SEND DEDICATION ACKNOWLEDGEMENT

REQUIRED DONOR INFORMATION

DONOR NAME : _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____

- MATCH** (My employer will match my investment. I have enclosed a matching gift form).
 LEGACY (Contact me to include The Children's Trust of South Carolina in my estate plan).

SIGNATURE: **X** _____

CONTACT ME BY:

- EMAIL or MAIL (With more information about The Children's Trust of South Carolina).

THANK YOU

Your investment is very much appreciated and fully deductible as a charitable contribution. The Children's Trust's tax ID number is 57-0785431. Please mail to **P.O. Box 11644, Columbia, SC 29211-9703** or fax to **803-744-4020**.