



I WANT TO BE A FRIEND OF LITERACY!

My tax-deductible donation will bring the gift of literacy to our community.

Name/Organization: _____

Mailing Address: _____

How your donation can help

(please make a selection)

_____ \$50 will give a beginning reader his/her first books.

_____ \$100 will train a new tutor.

_____ \$500 will sponsor a student for one year!

_____ Other amount _____



This Gift is (Check one)

In honor of _____

In memory of _____

Payment Options (Check one)

Enclosed is a check payable to "Oakland Literacy Council"

Please charge my credit card the following amount \$ _____

Master Card Visa

Name (as it appears on card) _____

Card Number _____ Exp. Date _____

Signature

Billing Address _____

City _____ State _____ Zip Code _____

Telephone Number (_____) _____ - _____

Simply print out this form and mail it to:

Oakland Literacy Council

2550 S. Telegraph Rd Suite 103, Bloomfield Hills, MI 48302

Your donation is tax deductible to the extent provided by law. MICS/CT10122