



I would like to **Champion AAO in the following way:**

- I will pledge a one time gift of \$_____.
- I would like to make a monthly pledge of \$_____ on the 10th or 20th (check one) of each month.
- Please contact me about making a financial commitment in other ways.



Name: _____

Address: _____ City _____
State _____ Zip _____

Home Phone: () _____ Cell Phone: () _____

Email Address: _____

- My check made payable to AAO is enclosed.
- Draft my Checking Account (enclose voided check)

Please Charge My:  

Credit Card No.: _____ Expiration: _____

Signature: _____

The donor may end or change this automatic donation request anytime with debbie@aaoteam.org or 479.442.9979 x 23. A record of your gift(s) will appear in your regular bank or credit card statement(s). AAO will send you receipt(s) for your tax preparation.