

**Option B - Credit Card Donation**

**(Note: Save the Mothers is a program of Interserve Canada, a registered Canadian charity, #10679-9349-RR0001. Any donation to Save the Mothers will be given a tax-deductible receipt.)**

First name \_\_\_\_\_

Last name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_

Province/State \_\_\_\_\_

Postal/Zip Code \_\_\_\_\_

Country \_\_\_\_\_

E-mail address \_\_\_\_\_

Donation amount \$ \_\_\_\_\_

Credit card type \_\_\_\_\_ Visa

\_\_\_\_\_ MasterCard

Credit card number \_\_\_\_\_

Expiry date \_\_\_\_\_

Card holder name (as written on card) \_\_\_\_\_

Signature \_\_\_\_\_

Please check here  if you wish to receive more information about Save the Mothers.

**(Print this form and return to:  
Interserve Canada, 10 Huntingdale Blvd., Scarborough, ON, M1W 2S5, Canada)**

