

Yes, I wish to support SC Lions Foundation to continue to help with LIONS Vision and Hearing programs.

Option 1: One-Time Annual Contribution – Check enclosed made payable to SCLF in the amount of:

- | | |
|---|--|
| <input type="checkbox"/> \$50.00 Sustaining Member - Minimum contribution
required to receive Sustaining Member pin. | <input type="checkbox"/> \$250.00 Pride |
| <input type="checkbox"/> \$100.00 Monarch | <input type="checkbox"/> \$500.00 Helen Keller |
| | <input type="checkbox"/> \$750.00 Visionary |
| | <input type="checkbox"/> \$1000.00 Dr. Franklin Mason Fellow |

Option 2: Recurring Contributions - using my credit card information below.

Please charge my credit card on the _____ day of the month, in the amount of _____ dollars.

- Monthly
 Quarterly
 Semi-Monthly (every other month)
 Semi-Annually (twice per year)

If you choose a recurring contribution, your card will only be charged through June 30.

Matching Gifts: If you qualify for matching gifts, please indicate here and ask about your company's Matching Gift Policy.



DONOR INFORMATION

PLEASE PRINT

Name _____ Phone _____

Billing Address _____ Billing Zip _____

Lions Club _____ Email _____

Visa/Mastercard/Discover Only _____

Name on Card _____

Card # _____

Exp. Date _____ - _____ Signature _____

Please send me information about having the SCLF in my will.

All gifts are tax deductible.

IRS Status 501 (c) (3) • Federal ID# 80-0796488 • SC. Dept of Public Charities