

**Print this form and mail or fax your gift.**

Your gift will help us heal one more woman, one more child from violence.

To make your gift, please fill out this form, and mail it with your check, money order, or credit card information to:

**Attn: Donations  
WEAVE, Inc.  
1900 K Street  
Sacramento, CA 95811**

This form may also be faxed to 916.443.7183

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**I want to improve the lives of women and their children exposed to violence.**

I would like to contribute: \$ \_\_\_\_\_

☐ One-time gift    ☐ Recurring monthly gift

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

For credit card donation, please provide this additional information:

Name (as it appears on the card) \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ (MM/YY)

Credit Card (circle one)   AMEX   VISA   M/C

Signature \_\_\_\_\_

To make your donation in memory of, or in honor of, someone special please fill out the below:

Please circle one: In memory of/honor of

I would like WEAVE to send a note to acknowledge my donation. Please send letter to:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If you have questions about WEAVE, please call Julie Bornhoeft, MA, CFRE, Director of Development and Community Relations at 916.319.4911.