



Lupus Foundation of America
2121 K Street, NW, Suite 200, Washington, DC 20037-1830
(Main) 202-349-1155 • (Fax) 202-349-1156 • www.lupus.org • donate@lupus.org

Yes, I would like to make a tax-deductible gift to support lupus research, education, and advocacy!

\$10 \$25 \$50 \$100 \$250 \$500 \$1,000 Other \$ _____

My check is enclosed. I would like to make a donation using my credit card listed below.

I would like to make this a recurring gift, and I authorize my bank to transfer the amount listed above **each month** to the LFA and have enclosed a check with my first month's contribution from the account I wish to use.

Signature _____

*Please return this form, including your check(s), to Lupus Foundation of America address listed above.

DONOR INFORMATION

Name _____

Address _____

City _____ State _____ Zip/Postal Code _____ Country (if not USA) _____

Phone _____ E-Mail Address _____

CREDIT CARD PAYMENT INFORMATION

Visa MasterCard Discover American Express

Name on Card _____

Card Number _____ CCV _____ Expiration Date _____

Signature _____

I would like to make this a recurring gift and I authorize the LFA to charge my credit card **each month** in the amount noted above.

HONORARY/MEMORIAL GIFTS (OPTIONAL)

I would like to make a gift: in honor of in memory of: Name _____

Message _____

Please send a card to notify: Name _____

Address _____

City _____ State _____ Zip/Postal Code _____ Country (if not USA) _____

To send additional cards, please write the recipients' names and addresses in the above format on a separate sheet of paper and mail or fax with this form.

Thank you for joining us to support all people affected by this cruel and mysterious disease!

The Lupus Foundation of America, Inc. is a 501(c)(3) Non-Profit Organization/Tax ID #43-1131436 and all monetary donations are tax deductible to the fullest extent allowed by tax laws. Please check with your financial advisor if you have more questions.