



For more information contact:
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Giving Options

Name _____ Date _____

As you would like it to appear on recognition materials or if you would prefer to be "Anonymous."

Address _____

Email _____ Phone _____

Giving Options

- Enclosed is a check for \$ _____ made payable to the Frazer Center.
- Please charge my credit card:
 - Recurring monthly gift of \$ _____
 - One time amount of \$ _____

Name as it appears on card _____

Billing Address _____

Credit Card Number _____ Exp Date _____ Code _____

Other Gift Information

- This will be matched by my employer _____
 (Please include matching gift form, if applicable)
- I participate in my company's United Way campaign or Combined Federal Campaign.
Frazer Center's United Way Code is 1212 | CFC Code is 82792
- This gift is in memory or honor of _____

Please notify the following individuals (include address) _____

[f/FrazerCenter](#) | [@FrazerCenter](#) | www.frazercenter.org
 1815 S. Ponce de Leon Ave. NE | Atlanta, Georgia 30307 | p: 404.377.3836 f: 404.373.0058

Thank you for your support!