



## CONTRIBUTION FORM

Please Print All Information

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Contribution Type

Cash                       Check                       Credit

Amount: \_\_\_\_\_ Make your check payable to FINCA International

### Credit Card Authorization

Visa                       American Express                       Discover                       MasterCard

Credit Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_

Donation:

Monthly                       Quarterly                       Annually                       One time Gift                       Other

Please specify month and date: \_\_\_\_\_

**Signature of Authorized User:** \_\_\_\_\_

Please return to:

FINCA International  
1101 14<sup>th</sup> Street, NW, 11<sup>th</sup> Floor  
Washington, DC 20005  
Fax: 202/682-1535

Questions? Please call 202/682-1510 or visit [www.villagebanking.org](http://www.villagebanking.org). Thank you for your charitable contribution to FINCA International.

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