



**American
Wheelchair Mission**

Donor Form

A donation of \$150 will deliver a brand-new wheelchair to a child, teen or adult in need of Hope, Mobility, Freedom and Independence.

\$150 \$300 \$500 \$1,000 Other \$_____ (Any amount is greatly needed and appreciated)

Donor/Contact Name _____ Organization _____

Address _____

City _____ State _____ Country _____ Zip _____

Telephone _____ E-mail _____

With a donation of \$150 you will receive a beautiful certificate of thanks with a photo of a wheelchair recipient.

CERTIFICATE WILL READ:

American Wheelchair Mission wishes to thank:

Donor (above)

Other _____

For the Gift made:

No designation In the Name of In Honor of In Memory of

No Certificate Please

Check enclosed (I am interested in attending a wheelchair distribution)

Credit Card Visa MasterCard American Express Discover

Name as it appears on card _____

Card Number _____ Exp. Date _____

Signature _____

PLEASE MAKE CHECK PAYABLE TO:

Mail Contribution(s) To: American Wheelchair Mission
c/o Dan Moberg
2600 E. Selfice Way, Suite #A172
Post Falls, Idaho 83854-7991 USA

For more information please contact: E-mail dmoberg@amwheelchair.org - Phone (208) 457-0745
Fax (208) 457-1248

For more information, to watch videos of wheelchair distributions around the world or to donate online, please visit: WWW.AMWHEELCHAIR.ORG

American Wheelchair Mission is a 501(c)(3) tax free organization - Tax ID# 26-4571639