

# Pledge Partner Program Application

## Making a monthly gift to Oxfam



Please fill out this form to sign up for Oxfam America's Pledge Partner Program and make a monthly donation. The form may be filled out electronically, or printed and filled out by hand.

Please mail this form to Oxfam America, Pledge Partner Program, 226 Causeway Street, 5<sup>th</sup> Floor, Boston, MA 02114-2206, or fax it to (617) 728-2595. Please call (800) 77-OXFAM with questions.

---

### 1. Personal Information

\_\_\_\_\_  
Title First Name MI Last Name

\_\_\_\_\_  
Current Street Address Line 1

\_\_\_\_\_  
Current Street Address Line 2

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

\_\_\_\_\_  
Email Address

I would like to receive confirmation via email

#### Spouse or partner's name

\_\_\_\_\_  
Title First Name MI Last Name

---

### 2. Payment Information

I would like to make a monthly pledge of:  \$30  \$20  \$15  Other amount:\$ \_\_\_\_\_

I would like to donate to Oxfam America by:  check  credit card  bank account transfer  other: \_\_\_\_\_

*\*If donating by check, Oxfam will send you a monthly reminder.*

#### Automatic Bank Transfer Authorization *(Please include a check from your bank account marked "void" for this request.)*

I authorize my bank to transfer the amount indicated above from my account each month. A record of each donation will be included on my monthly bank account statement.

#### Credit/Debit Card Information

I authorize Oxfam America to make a monthly charge of the amount indicated above on my credit card. A record of each charge will appear on my monthly credit card statement.

Card type (check one):  VISA  MasterCard  Amex  Discover

\_\_\_\_\_  
Card Number 3-Digit Security Code / Expiration Date

\_\_\_\_\_  
Signature Date / /

**All gifts made to Oxfam America are tax deductible to the extent allowable by law. Thank you for your generous support!**