



A Mission-Driven Gift

How do you want to give?

One-Time

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

Monthly

I would like to become a Better Together Monthly Giving Community* member beginning ____/____/____ with a monthly donation of:

- \$5 \$10 \$25
- \$50 \$100 \$150
- Other: _____

* Monthly donations will be processed until donor notifies Shangri-La of discontinuation.

Option 1: Please charge my debit/credit card each month. I have provided my debit/credit card information on this form.

Option 2: Please automatically withdraw my monthly gift from my checking account. I have included a voided check.

Option 3: Shangri-La employees only. Please automatically withdrawal my monthly gift from my Shangri-La paycheck.

What do you want to support?

- Greatest Need
- Access to community opportunities (JKF)
- Health and wellness assistance (LSF)
- Home repairs (HF)
- Endowment fund

GIVE ONLINE

Skip the paper and postage. Go online to www.ShangriLaOregon.org, and click on the "Donate Now" button in the top right corner.



Shangri-La
Enriching Lives Together

If you need assistance, call 503-581-1732, x328.

Return to: Shangri-La, Attn: CETeam, 4080 Reed Road SE #150, Salem, Oregon 97302

Contact Information

Name

Mailing Address

City

State

Zip

Phone

Email Address

Payment Information

My check made payable to Shangri-La is enclosed.

I authorize Shangri-La payroll deduction.

Signature

Date

Please charge my credit/debit card

- Visa Master Card
- AmExpress Discover

Name

Account #

Expiration Date

Signature