



Engineers Without Borders USA
Las Vegas Professionals Chapter

Donation Form

EWB-LVP
www.ewb-lv.org
 P.O. Box 27808
 Las Vegas, NV 89126

Donor Information (please print or type)

Name	
Billing address	
City	
State	
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Telephone (home)	
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Company Information (If Applicable):

Pledge Information

I (we) would like to make a tax-deductible donation of \$_____.

I (we) plan to make this contribution in the form of:

___ cash ___ check ___ other.

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

___ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

EWB-USA

Please write out EWB-LVP in the memo line.