

Donation Form



Pathways Within, Inc. / Roads to Reading Initiative

Changing Communities One Child At A Time

Donor Information (please print or type)

Name _____
Billing address _____
City, ST Zip Code _____
Phone: _____
Email _____

Pledge Information

I (we) pledge a total of \$ _____ to be paid: now monthly quarterly yearly.
I (we) plan to make this contribution in the form of: check credit card other.
Credit card type | Exp. date _____
Credit card number _____
Authorized signature _____
Gift will be matched by (company/family/foundation) _____
 form enclosed form will be forwarded

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:

Pathways Within, Inc. / Roads to Reading Initiative
20 Charlesgate West, #515
Boston, MA 02215

We value your privacy. We do not sale or share any information on our donors or the organizations we serve.