

Honorary Gifts

Your information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

This gift of \$25 \$50 \$100 Other: \$_____ is made in

honor of Mr./Mrs./Ms. _____

Please acknowledge this contribution to:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

If you are paying with a check, please make the check payable to JWV.

Credit Card:

____ Visa _____ Mastercard Amount: \$ _____

Credit card number: _____

Expiration date: _____

Signature: _____

Mail it to:

Jewish War Veterans of the USA
1811 R Street, NW
Washington, DC 20009