

# Brighter Vision Foundation.

Fed Tax ID#75-3225106\*A Non Profit 501(C)(3) Organization Charity Status 170(b)(1)(A)(VI)

1130 E I-30\*Rockwall, TX 75222

Mr. Dahya Patel - (972) 722-9922

Mr.Naresh Patel - (214) 228 1710

Email: Dpatel58@sbcglobal.net

## Personal Information

		Date: _____
Name: _____	<i>First Name</i>	<i>Last Name</i>
Street Address: _____		
City/Town: _____	State: _____	Postal Code: _____
Email: _____	Phone: (_____) _____ - _____	
<b>Note*: 1 Day \$1 (minimum \$365) \$ _____</b>		

## Purpose of Donation

:- Education. :- Sponsorship. :- Gen.Donation. :- Slow Learner School. :-Relief Funds.

:-\_\_\_\_\_. :-\_\_\_\_\_. :-\_\_\_\_\_. :-\_\_\_\_\_. :-\_\_\_\_\_.

## Credit Card Payment

Card type: Visa MasterCard American Express

Amount: \_\_\_\_\_ Expiry (mm/yy) : \_\_\_\_\_/\_\_\_\_\_

Card #: \_\_\_\_\_

Name on card: \_\_\_\_\_ CVV number: \_\_\_\_\_

## Cheque Payment

Name: \_\_\_\_\_

Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Cheque Number: \_\_\_\_\_

Note: please draw the cheque in favour of "Brighter Vision Foundation."

## Cash Payment

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Amount: \_\_\_\_\_

Date

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Signature

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Thank you for your generosity  
Your help is greatly appreciated