



DONATION FORM

I. Donor Information

Individual Name _____

Organization Name _____

Street Address _____

City/State/Zip/Country _____

Daytime Telephone/Cell. # (Include Area Code or Country & City Code in Intl.)

Email _____

II. Donation Categories

Please indicate the amount of your donation for the specific area designated. All donations are designated in support of projects in the Volta Region of Ghana, West Africa.

\$ _____ Good Samaritan School & Orphanage*

\$ _____ Mobile Medical Clinic/Medical Aid*

\$ _____ Clean Drinking Water Project*

*(Go to www.heartbeatforafrica.org/donate to give online)

III. Remit Donation (As a resident of the U.S. your donation is tax deductible)

All donations must be remitted in US Dollars. Please send this donation form along with your check or money order payable to Heartbeat for Africa Foundation and mail to:

Heartbeat for Africa Foundation, 1517 Wilmot #104, Tucson AZ 85712, USA
ATTN: Mrs. June Crawford.