



**THE BLIND  
& VISUALLY  
IMPAIRED  
C E N T E R**  
OF MONTEREY COUNTY INC.

225 Laurel Ave, Pacific Grove, CA 93950  
831-649-3505  
[www.blindandlowvision.org](http://www.blindandlowvision.org)

## Donation Form

Please mail to The BVIC, 225 Laurel Ave, Pacific Grove, CA 93950 or fax to 831-649-4057.

Business/Donor Name(s): \_\_\_\_\_

Business Contact Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

Cash    Check    Charge    Gift-In-Kind    Stock (please use Stock Donation Form)

Visa    MasterCard    Please make this an on-going Monthly Donation. I understand I can call and request an amount change or stop at any time.

# \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Describe Gifts-in-Kind (items). Value: \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Thank you very much for your support!***

***Tax ID#23-7221588***