

# The Oklahoma Institute for Child Advocacy

## *Donation Form*

**Visionary**  
\$10,000 and greater

**Benefactor**  
\$5,000 - \$9,999

**Humanitarian**  
\$1,000 - \$4,999

**Champion**  
\$500 - \$999

**Friend**  
\$100 - \$499

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Organization (if Organizational Donation) \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

Phone 1 (\_\_\_\_) \_\_\_\_\_

- Business
- Home
- Mobile
- Fax
- Other \_\_\_\_\_

Phone 2 (\_\_\_\_) \_\_\_\_\_

- Business
- Home
- Mobile
- Fax
- Other \_\_\_\_\_

I would like to donate \$ \_\_\_\_\_ Check # \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_



Mail to:

OICA  
420 N.W. 13<sup>th</sup> Street, Suite 101  
Oklahoma City, OK 73103