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SOS Guardian Angel Education Fund, Inc. (GAEF)**

I am making a donation of \$ _____

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to my credit card Visa Master Card AMEX Discover

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Check payable to:

GAEF

P.O. Box #11293, Spring, TX 77391-1293

For monthly bank debit, please attach voided check.

Monthly donation to be debited \$ _____

Debit to stop in 12 months 24 months 36 months will advise when to stop.

**SOS Guardian Angel Education Fund, Inc. (GAEF) is a 501(c)(3) nonprofit organization.
Donations are tax deductible within the limits specified by law.**

*Card Validation Code (CVC). For your safety, as an additional security precaution, we require your card's validation code. **Visa / MasterCard:** The last 3-digit, non-embossed number printed on the signature panel on the back of the card immediately following the credit card account number. **American Express:** The 4-digit, non-embossed number printed above your account number on the front of your card.