



# MAC

Massachusetts Advocates for Children  
25 Kingston Street, 2<sup>nd</sup> Floor  
Boston, MA 02111

\_\_\_\_ My company/my spouse's company has a matching gift program  
that will add to my contribution.  
Enclosed is a matching gift form from the company.

\_\_\_\_ Please contact me for planned giving opportunities.

All contributions are tax-deductible to the extent permitted by law.

THANK YOU!

Yes, I want to help MAC continue and expand its advocacy on behalf of children of the Commonwealth at the following level:

\_\_\_\_ \$1000    \_\_\_\_ \$500    \_\_\_\_ \$100    \_\_\_\_ \$50    \_\_\_\_ \$25    Other \$ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

E-mail (to receive periodic updates about MAC's activities) \_\_\_\_\_

In Memory/Honor of \_\_\_\_\_

Please notify \_\_\_\_\_

Amount enclosed \$ \_\_\_\_\_ (Please make checks payable to MAC)

Please charge my gift of \$ \_\_\_\_\_ through

\_\_\_\_ Visa    \_\_\_\_ Master Card    \_\_\_\_ American Express    \_\_\_\_ Discover

Card number \_\_\_\_\_ Expiration \_\_\_\_\_

Name (as it appears on the credit card)  
\_\_\_\_\_



**United Way**  
of Massachusetts Bay