



Donate online at www.unidosnow.org

I/we (name, first & last): _____ give in the amount of: _____ to the non-for-profit organization, UnidosNow.

I/we prefer to pledge _____ for **one, two or three** years. (circle one)
Date of first payment: _____

Gift given in **honor** or **memory** of (circle one): _____

Donor name for recognition purposes: (indicate if corporate): _____

Signature: _____ Date: _____

Please remember Unidos Now in your will or estate plan.

For this tax-deductible gift, please:

- See enclosed check - payable to Unidos Now Charge my **VISA / MasterCard / Discover/ American Express** (circle one)

Name on Card: _____

Billing Address of Card: _____

City: _____ State: _____ Zip: _____

Signature _____ Date _____

Phone: _____ E-mail: _____

Account # _____ 3-Digit #/: _____ Expires _____

Please return this form to:

Glasser Schoenbaum Human Services Center
UnidosNow
1750 17th
Street, Suite D
Sarasota, FL 34234

Contact UnidosNow for more information: 941-256-0625 or info@unidosnow.org

Thank you for investing in your community.