Please return your tax-deductible gift with this form to:

Mikva Challenge

200 S. Michigan Avenue Suite 1000 Chicago, IL 60604



Donor Information

First Name	Last Name _		Date	
Address 1				
Address 2				
City	State	e	_ Zip	
Email				
Gift Information				
☐ Enclosed is my gift of \$		(Please make checks	payable to Mikva Challenge.)	
☐ Please charge my credit car	rd (circle to select frequenc	cy) Monthly Recurring	One-Time	
☐ Visa ☐ Ma	stercard	x		
Credit card number		Expira	Expiration Date	
Name on card		Securi	Security Code	
Signature				
Gifts can also be made online	at mikvachallenge.org/do	onate		
Memorial and Tribute Don	ations (Optional)			
This gift is in \Box Memory of	:			
Name	•			
Send gift notification to:				
Name				
Email				

Thank you for supporting Mikva Challenge!

For information about other ways to give, including donor-advised funds and stocks, contact us at **donations@mikvachallenge.org** or **312-863-6347**. Mikva Challenge is a 501(c)3 nonprofit organization as determined by the Internal Revenue Service. Our tax ID number is 52-2033353. Your gift is tax deductible to the extent allowable by law.