



# LA LECHE LEAGUE INTERNATIONAL

Thank you for giving mothers the support they need and babies the best start in life!

**Mail completed form to:** La Leche League International  
Attn: Development Department  
957 N. Plum Grove Road  
Schaumburg, IL 60173 USA

Name: \_\_\_\_\_ Anonymous  yes  no

(Name as you would like it to appear in LLLI publications)

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**I would like to make a tax-deductible gift of \$ \_\_\_\_\_.**

I wish to extend my gift with a pledge of \$ \_\_\_\_\_ for \_\_\_\_\_ year(s).  
Start date: \_\_\_\_\_ Payment Period:  Annually  Quarterly  Monthly

1)  **My check is enclosed.** (Please make your check payable to La Leche League International.)

2)  **Please charge my gift to:**  
 VISA  MasterCard  American Express  Discover

Account #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (security code)

My company will match my gift.

## Honorary & Memorial Tribute Gifts

Publish Message  yes  no

For a gift of \$50 you can honor someone special. Your tribute can be published in the LLLI magazine, *New Beginnings* magazine (20 word maximum). The Development Department can notify the specified individual(s) with a personalized card.

My gift is... In Honor of \_\_\_\_\_ In Memory of \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
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