

PANCREATIC CANCER ACTION NETWORKSM

Donation Form
For more information, call 877-272-6226

Please print and complete the form below. Make checks payable to Pancreatic Cancer Action Network and send to:

Pancreatic Cancer Action Network
1500 Rosecrans Ave., Ste. 200
Manhattan Beach, CA 90266

Name _____ Mr., Mrs., Ms., Other _____

Company or Organization (if applicable) _____

Address _____

City _____ State _____ Zip _____ Country _____

Home Phone _____ Work Phone _____

Fax _____ Email _____

☐ Yes, this donation is in honor of someone or for a special occasion.

☐ In honor of _____

☐ In memory of _____

☐ Your special message _____

☐ Yes, I want an acknowledgment letter sent to the following individual:

Name _____

Address _____

City _____ State _____ Zip _____

☐ I want to donate monthly. Please charge my credit card for the same amount each month.

(You may change or cancel your monthly gift at any time by emailing donations@pancan.org or calling 877-272-6226.)

☐ Visa

☐ MasterCard

☐ American Express

☐ Discover

Donation Amount \$ _____

Credit Card Number _____ Expiration Date _____ CID* _____

Name on Credit Card _____

Billing Address (if different from above) _____

City _____ State _____ Zip _____ Country _____

☐ I do not wish to receive news and other information from the Pancreatic Cancer Action Network

Note: Many employers will match your personal donation to Pancreatic Cancer Action Network. Check with your company for more information on matching gift programs. Pancreatic Cancer Action Network, Inc. (PanCAN) is a 501(c)(3) non-profit corporation. Federal Tax ID #33-0841281.

*CID is located on back of the card next to the signature, or if AMEX, on the front above the card number.