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Name  List as Anonymous

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Address

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City, State & Zip

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Email Phone (cell/home/work)

**How would you like your gift to be used? (Please select one)**

General Giving  Course Development Fund  Partner Training & Support Fund  Technology Fund

**Donation Amount**

\$2,000  \$1,000  \$500  \$250  \$150  Other

One-Time Donation  Recurring Monthly

**Payment Method**

Direct Debit

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Financial Institution & Branch Name

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Routing Number

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Account Number

Credit Card

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Name on Card

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Card Number CVV Code

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Expiration Date Signature

Cash (enclosed)  Check (payable to Charlie Academy)

**Mail to:**  
Charlie Academy  
C/O J. Murphy & Associates  
1300 NE Godward Street, Suite 2625  
Minneapolis, MN 55413

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Thank you for supporting Charlie Academy, a 501(c)3 nonprofit (EIN: 82-1593798). Your gift is tax deductible.