Please complete the form and mail your donation to us.

| Contributions are solicited with |
|----------------------------------|
| the understanding that Pure |
| Charity has complete control & |
| administration of the use of |
| donated funds. Please make |
| your check payable to "Child |
| Beyond International's Fund at |
| Pure Charity" and address your |
| envelope to PO BOX 1234 |
| Searcy, AR 72145. Gifts to Pure |
| Charity are deductible for |
| income tax purposes as allowed |
| by law. Contributions |
| postmarked by December 31 |
| will be acknowledged for that |
| tax year. |

| FIRST NAME | LAST NAME |
|-------------------|----------------------------|
| STREET ADDRESS | APT. / SUITE / UNIT |
| CITY / TOWN | STATE / REGION / PROVINCE |
| POSTAL / ZIP CODE | AREA CODE AND PHONE NUMBER |
| | FUN221502 |

EMAIL ADDRESS

DONATION ID