

# PLEASE CONSIDER MAKING A DONATION TODAY

## OPTION 1:

Make checks payable to **OPAWC\***. 100% of funds will go toward Malalai Joya's projects. Please note that OPAWC is not a registered 501-c-3 organization and donations are not tax-deductible.

*\*Organization for the Promotion of Afghan Women's Capabilities.*

## OPTION 2:

Make checks payable to **International Humanities Center** – please write “Malalai Joya” in the memo. Or use the credit card form below. IHC is a registered 501-c-3 non-profit organization and donations are tax deductible to the extent of the law. Note: There is a 5% administrative overhead.

For more information, visit [www.afghanwomensmission.org](http://www.afghanwomensmission.org).



Patient receives care at Hamoon Clinic, Farah.

Please hand all checks or credit card forms to an event organizer, or mail them to **International Humanities Center, P.O. Box 923, Malibu, CA 90265.**

## DONATIONS WILL BE USED FOR...

1. **Malalai Joya's US tour** – a grassroots group of volunteers and organizations across the US have organized a speaking tour for Ms. Joya. Funds are needed to pay for her travel, room and board.
2. **Hamoon Clinic** - Malalai Joya runs **Hamoon Clinic** in the remote Farah Province of Afghanistan. Hamoon Clinic is the only health center in the area that offers free services (including medication) to its patients, who are primarily women and children. Hamoon has been forced to downsize its medical staff due to a dangerous drop in funding.

## CREDIT CARD FORM FOR TAX-DEDUCTIBLE DONATIONS TO MALALAI JOYA

Please fill out this form and mail it along with your check or credit card information to **International Humanities Center, P.O. Box 923, Malibu, CA 90265, USA. Specify “Malalai Joya” in the memo of your check. Your donation is tax deductible to the extent of the law.**

### DONOR INFORMATION Please Print Clearly

Name (first, m.i., last) \_\_\_\_\_

#### Mailing Address

street address \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip code \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_

#### AMOUNT OF DONATION

\$20  \$50  \$100  \$200  \$500  \$1000

Other \$ \_\_\_\_\_

I wish to be a regular donor - please mail me a pledge form.

**CHECKS** Please make checks payable to: "**International Humanities Center,**" and write "Malalai Joya" in the memo.

#### CREDIT CARDS

Type of Credit Card:

Visa  Mastercard  Discover  American Express

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Billing Address  same as mailing address

street address \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip code \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_