

Donor Information

| | |
|-------------------|--|
| Name/Organisation | |
| Address | |
| City | |
| State | |
| Telephone (home) | |
| E-mail | |

I prefer that this contribution and/or my name remain confidential.

Pledge Information

A one-off /single donation of Kshs _____

A regular/recurring donation of Kshs _____

Once every ____ month ____ quarter ____ year amounting to Kshs _____

Mode of Payment

Cheque (Enclosed) Please make cheques payable to AMREF

Contact Me

Notes:

- Contributions to AMREF are deemed charitable under Income Tax Act, Section 13, First Schedule, [NGO Coordination Regulations, 1992, 2nd Schedule](#), Paragraph 4(a) and 4(b)]. Please consult your accountant for any clarifications.
- Payments must be received before the end of the year to be eligible for a tax deduction in that year.
- There is no minimum contribution amount.
- For more information please visit www.amref.org or call +254 20 699 3000 or write to emily.mworia@amref.org

Please forward the completed form and payments to:

AMREF
P.O. Box 27691, 00506, Nairobi, Kenya

Or Fax to
+254 6009518