



**Yes, I am a RE/MAX Equity Group AGENT and I want to help our communities...Please contribute \$\_\_\_\_\_ on my behalf**



**ONCE EACH MONTH until further notice**

- Bill to my monthly personal expense
- Charge to my credit card  
 \_\_\_\_ MC \_\_\_\_ VISA \_\_\_\_ Discover Card \_\_\_\_ American Express  
 Account number \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Signature \_\_\_\_\_

**From EACH of my commissions until further notice**

**ONE TIME only**

- Check enclosed
- From my next commission
- Bill to my monthly personal expense
- Charge to my credit card  
 \_\_\_\_ MC \_\_\_\_ VISA \_\_\_\_ Discover Card \_\_\_\_ American Express  
 Account number \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Signature \_\_\_\_\_

*Thank You*

*On behalf of the many children and families in our local communities your donations are able to help, we thank you for reaching out and **Caring for Your Community!***

*Your contributions make a huge difference in the lives of kids and families needing a helping hand and a compassionate heart.*

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Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Effective Date \_\_\_\_\_ **Signature** \_\_\_\_\_



**Please Return To: Equity Group Foundation  
PO Box 25308 Portland, OR 97298  
8405 SW Nimbus Ave, Suite C Beaverton, OR 97008**