

Credit Card Donation Form

Cartagena Music Festival Package and Price: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

Or other donation amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card (Circle One): Visa, MasterCard, Discover

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

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address: Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State and Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Amount to be Billed: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Security Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Donor’s email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mail completed and signed form to:

Dr. Edward G. Ludwig, Treasurer

Victor Salvi Foundation

26307 Dunwurkin Road

Freeman, MO 64746

Or send a scan of the completed and signed form via email to:

[egludwig123@gmail.com](mailto:egludwig123@gmail.com), with Donation VSF in subject line

Thank you for your support and donation to the Victor Salvi Foundation

You will receive a receipt and thank you letter, either via email or by standard US mail

Edward G. Ludwig,

Treasurer, Victor Salvi Foundation

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