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evidenceaction.org

### Evidence Action Donation Form

Please complete all sections of this form. If you wish to donate anonymously, please leave the contact information blank.

Date \_\_\_\_\_

#### CONTACT INFORMATION

Donor's Full Name \_\_\_\_\_

Organization Name (if any) \_\_\_\_\_

Email \_\_\_\_\_

Organization Email (if any) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_

Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Phone Number (optional) \_\_\_\_\_

#### DONATION INFORMATION

Amount: \_\_\_\_\_

Would you like to restrict your giving?

No, I choose not to restrict my giving allowing my contribution to go to where the need is greatest

Yes, I choose to restrict my giving to the following:

Dispensers for Safe Water

Deworm the World Initiative

Accelerator

Is this a Matching Gift?

Yes (Employer's Name) \_\_\_\_\_

No

How did you hear about us?

Not Specified

The Life You Can Save

Giving What We Can

Personal Recommendation

Social Media

Board Member Referral

Y-Combinator

Crowdrise

Other \_\_\_\_\_

GiveWell, and if so:

Yes, you may share my information with GiveWell

No, you may not share my information with GiveWell

Should you require any assistance please contact us at [donate@evidenceaction.org](mailto:donate@evidenceaction.org).  
Thank you in advance for your support to Evidence Action.

Please make donation payable to **Evidence Action** and email the completed donation form to [donate@evidenceaction.org](mailto:donate@evidenceaction.org) or mail it to the following address:

PO Box 65480  
Washington, DC 20035  
United States