My Information	n:	
First Name	Last Name	
Address	City	State
Zip Code	Email Address	Phone Number
My Gift to the a	aio Foundation:	
Amount to gift:	I want my gift to sup	pport:
<b>\$50</b>	Area of greatest need	
<b>\$100</b>	☐ Kahauiki Village	
\$250	Reach the Runwa	у
<b></b> \$		
My Gift Metho	d:	
Check payable to	aio Foundation	
Credit/debit card	d (fill out the information below):	
		/
Card Holder's Name	Card Number	Expiration Date (MM/YY) CVV2

## Mail This Form:

Address: aio Foundation

1000 Bishop Street, Suite 202

Honolulu, HI 96813

For Online Donation: Go to donate.aiofoundation.org