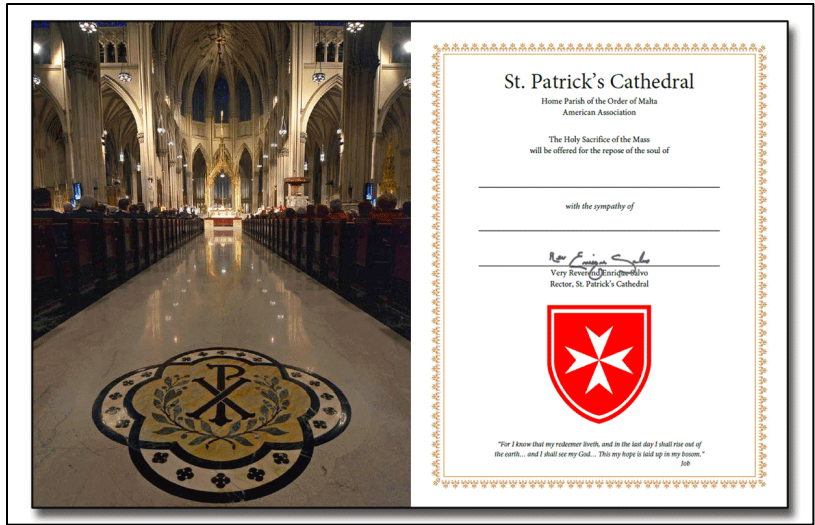
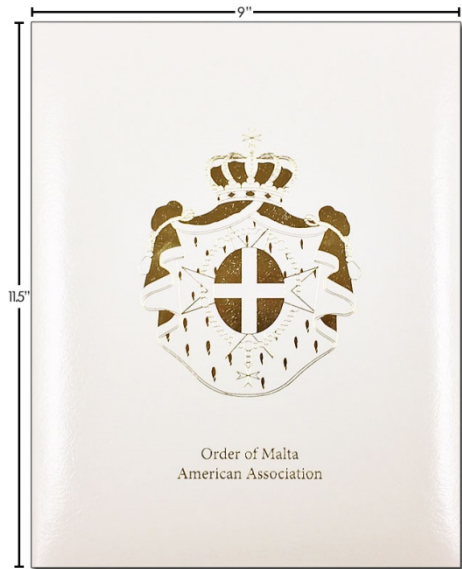


# ORDER OF MALTA AMERICAN ASSOCIATION MASS CARD DONATION FORM

Please return this entire page



<b>Your Name:</b>		
<b>Your Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Number of Mass Cards Requested:</b>		
<b>Payment Amount Enclosed:</b>		<b>(Minimum requested donation is \$60.00 per mass card)</b>
<input type="checkbox"/> <b>My check is enclosed made payable to: Order of Malta, American Association</b>		
<input type="checkbox"/> <b>I will pay by the credit card information below:</b>		
<b>Card Type:</b>	<input type="checkbox"/> <b>American Express</b>	<input type="checkbox"/> <b>Mastercard</b>
	<input type="checkbox"/> <b>Visa</b>	<input type="checkbox"/> <b>Discover</b>
<b>Credit Card Number:</b>	<b>Expiration Date:</b> /	<b>CVV:</b>
<b>Signature:</b>		
<i>Must be signed in order to process credit card payment</i>		

**OFFICE USE ONLY**

**Order of Malta American Association**  
 LB # 1618  
 P.O. Box 95000  
 Philadelphia, PA 19195-0001

**Telephone:** (212) 371-1522  
**Fax:** (212) 486-9427  
**E-Mail:** [staff@orderofmaltaamerican.org](mailto:staff@orderofmaltaamerican.org)  
**Website:** [www.orderofmaltaamerican.org](http://www.orderofmaltaamerican.org)