


LEVELS OF GIVING

| | |
|---------------------------|----------------|
| \$1,000 | \$110 |
| \$500 (Set of Patches) | \$50 |
| \$365 (Shoulder Patch #2) | \$25 |
| \$250 (Shoulder Patch #1) | Other \$ _____ |

PAYMENT METHOD

| | | | |
|--|-------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> Credit Card | <input type="checkbox"/> Cash | <input type="checkbox"/> Check* | <input type="checkbox"/> Pledge |
| I plan to give through CFC #12077 | | | |
| I plan to give through Aloha United Way #96100 | | | |
| I gave online | | | |
| *Please make checks payable to: Aloha Council | | | |
| Scan the QR code to donate online at the Pukahi District's page: | | | |



CREDIT CARD INFO

| | | | | |
|--------------------------|---------------------------|-----------|---------|----------|
| CC#: _____ | Exp: _____ | | | |
| Card Type | Visa | M/C | Amex | Discover |
| Charge or Bill Me: _____ | Billing Start Date: _____ | | | |
| One Time | Semi Annual | Quarterly | Monthly | |

ALOHA COUNCIL, BOY SCOUTS OF AMERICA

42 Puiwa Rd, Honolulu, HI 96817 • (808) 595-6366 • www.scoutinghawaii.org



2023 FRIENDS OF SCOUTING ANNUAL CAMPAIGN

Donor/Parent Name: _____

Scout's Name (if applicable): _____

Address: _____

City: _____ State: _____ ZIP: _____

Unit Type: _____ Unit #: _____ District: **PUKAHI**

Phone: _____ Email: _____

My company will match my gift: Yes No

Donor's Signature: _____

MAHALO FOR YOUR GENEROSITY!