



Donation Form

The Reliv Kalogris Foundation provides nutritional supplements to thousands of malnourished children throughout the world. Below are several ways you can donate as a Reliv Distributor. All donations are Tax Deductible to the extent the law allows.

_____	_____
Distributor Name	Distributor RCN Number
_____	_____
(Area Code) Telephone Number	Email Address

RKF Cash Donation For every dollar donated to foundation you will get an equal amount in points (ie: \$20 = 20 PV)
No BV or distributor discounts applied

Amount \$ _____ **One Time:** _____ **Monthly:** _____

- Check or Cash Enclosed Credit Card (enter info below)

“NOW WE CAN” Donation Package
By choosing this package you will be donating \$60 to the foundation, providing nutrition to 12 malnourished kids for one month. Open to Non MA's 100 PV/60 BV/60 RV

Quantity of Packages: _____ **Amount** (\$60 each pack) \$ _____ One Time Monthly

- PVQ Protection** If you are a MA and above, this pack may count towards your monthly maintenance if you choose. Choose one of the following options below.
- Monthly** – *Charged automatically on the 1st of every month*
- As needed** – *Charged on an as needed basis*

If you have questions regarding your PVQ plan please call the DSC 800-735-4887

CREDIT CARD PAYMENT

- Visa MasterCard American Express Discover

I hereby authorize Reliv Inc. to process a charge to my Credit Card:

- One Time Charge**
- Monthly** — *Automatically charged 1st of the month.*
- As needed for PVQ Protection** — *charged 1st week of the month based on the previous month's activities, If PVQ was not met*

Card Number: _____ - _____ - _____ - _____

EXP. Date MO. ____ / YR. ____

Cardholder's Name _____

Billing address _____