

Your generosity allows **The Survivor Mitzvah Project** to provide life-saving care for elderly Holocaust Survivors in Eastern Europe who are in urgent need of food, medications, heat and shelter. \$150 provides one Survivor one month of needed care. \$1800 provides support for one year.

\$5,000 \$2,000 \$1,800 \$1,000 \$500

\$250 \$180 \$150 Other amt. \$ _____

THE SURVIVOR MITZVAH PROJECT

is a 501 (c) (3) nonprofit organization
providing direct financial aid to elderly Holocaust Survivors in Latvia, Lithuania,
Belarus, Moldova, Russia, Slovakia, Transnistria, and Ukraine.

All donations are tax deductible.
Check payable to The Survivor Mitzvah Project

Name(s) of Donor(s) _____

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Occasion _____

Name and address of person to receive acknowledgment _____
