

## **Garden of Peace Donation Form**

I want to help commemorate the lives of victims of homicide by making a donation to the Garden of Peace. My donation will be used exclusively to subsidize engraving costs for families who cannot afford them, and/or to support the ongoing maintenance of the Garden and the annual Honor Program.

My information (required):		
Name		
Address		
City	State	Zip
Telephone	Email	
I'm enclosing a check in the am of Peace, One Ashburton Pl., Su		A/Garden of Peace* and will mail it to MOVA/Garde
If you have a personal connecti  This donation is made:  ☐ in honor of ☐ in memory of	on to a Commemorated Victim or th	ne Garden, please include that in the space below.
Name		
Please send acknowledgement	t of my donation to:	
Name		
Address		
City		
Email		
Include message in acknowledg	gement (use back of page if needed):	:
·	ss to the email distribution list for im outside the Garden of Peace and I m	nportant Garden information. I understand my emai ay unsubscribe at any time.

## **MOVA/Garden of Peace**

One Ashburton Pl., Suite 1310, Boston, MA 02108 gardenofpeace@mass.gov | 617-586-1369 | www.mass.gov/gardenofpeace

\*As an agency of the Commonwealth of Massachusetts, the Mass. Office for Victim Assistance (MOVA) is considered a charitable organization pursuant to 26 U.S. Code § 170. Donations are used solely for the public purpose of supporting the Garden of Peace. Written confirmation of the preceding, your donation amount, and the Commonwealth's Tax Identification Number will be provided to you upon receipt of your donation.

03/2022