

PSEFS!GPSN		Date:	
First Name		Last Name	
Organization			
Mailing Address			
Email			
Tvctdsjqjpo	Dvssfodz	2!zfbz	3!zfbst
Individual			
Organization			
Senior/student			
Gift			
Name and address of "Friend"			
CbdI!jttvf)t*	Qmfbtf!hjwf!wpmv n f! ' !jttvf!op!/ps!ujumf	Rvbmjuz	
Vol./Issue no.			
Vol./Issue no.			
Vol./Issue no.			
Vol./Issue no.			
Donation		Amount	
		TOTAL	
Gps!Qbz n fout!boe!epobujpot!cz!dsfeju!dbse			
Credit card no.			
Expiry Date			
Authorized Signature			
Palestine-Israel Journal • 4 El Hariri St., POB 19839, 91197 Jerusalem • • Tel: 972(2)6282115/59 • Fax: 972(2)6273388 • E-mail: pij@pij.org			