

DONATION FORM

Helping the "Sometimes Forgotten Children" turn their dreams into reality.

I WANT TO GIVE THE GIFT OF A BRIGHTER FUTURE...

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email: _____

ENCLOSED IS MY GIFT TO THE MARY GRAHAM CHILDREN'S FOUNDATION

- \$25 \$50 \$100 \$250
 \$500 \$1000 OTHER \$ _____

***** All gifts are tax-deductible | Tax ID 94-3377000 *****

I would like to pay this same amount annually. Please mail me a payment form once a year.

This gift is: In memory of In honor of _____

Please send notification of my contribution to:

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Please send this form along with your donation to:

MARY GRAHAM CHILDREN'S FOUNDATION

P.O. Box 792

Stockton, CA 95201

If you have any questions, please call us at (209) 403-5654

