



Wellspring Women's Center Donation Form

I would like to make a donation of \$_____.

Donation made by: _____

Address: _____

City, State, Zip: _____

Is this donation being made in memory or in honor of someone special? If so, complete the following:

In Memory of: _____

In Honor of: _____

Send an acknowledgment card to:

Name: _____

Address: _____

City, State, Zip: _____

This gift is made by: Check VISA MasterCard Discover American Express

Card # _____ Expiration Date: _____

Signature: _____

If making your donation via credit card, please include a phone number where we can reach you for any questions.

Phone: _____

Mail completed form with your donation to:

Wellspring Women's Center

P.O. Box 5728

Sacramento, CA 95817

Or fax to (916) 739-1178

Call (916)454-9688 if any questions.

Wellspring Women's Center is a 501(c)3 nonprofit organization, Federal EIN 91-1752615. Contributions are tax-deductible to the extent provided by law.

Thank you!