

Contribution Form

Name _____

Address _____

City _____ State _____ Zip Code _____

Amount Enclosed \$ _____ Phone (opt) _____

Email Address _____

____ I wish my contribution to remain anonymous.

____ I wish my contribution to be tax deductible where allowed by law. My check is made out to the "*League of Women Voters Education Fund*" which is a 501(c)(3) organization.

____ I wish to support the League's action priorities. My check is made out to the "League of Women Voters" and is not tax-deductible.

Comments _____

Thank you for your support!