

**Friends of Allensworth**

Please mail this completed form to:  
Friends of Allensworth  
PO Box 210551  
Chula Vista, CA 91921

**Donation Form**

Please print this form and complete the information below to ensure proper preparation of your tax receipt. (please print clearly)

**Today's Date:** \_\_\_\_\_

**Amount of Check:** \$ \_\_\_\_\_ payable to Friends of Allensworth

**Donor Name:** \_\_\_\_\_

**Organization Name** (if applicable): \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Email:** (optional) \_\_\_\_\_

**Telephone Number:** (optional) \_\_\_\_\_  Home  Mobile

**Note:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Your questions and feedback are very important to us. Please feel free to contact us at  
friendsofallensworth.org or call 1-877-245-6232.  
**Thank you for your support.***