



DONATION FORM

Print, complete and return by fax or mail

Where you would like your contribution to go?

- Area of Greatest Need
- Children
- Youth
- Families
- Girls & Women
- Elderly
- Veterans
- Homelessness
- Recovery & Re-entry
- Housing

What amount can you give?

- \$25.00
- \$50.00
- \$100.00
- other _____
- \$250.00
- \$500.00
- \$1000.00

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

I'm paying by: Visa Master Card American Express Check

Account Number _____ Exp. Date _____

Name on Card _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____ Today's Date _____

Please make check payable to: Volunteers of America Los Angeles

Mail to: 3600 Wilshire Blvd., Suite 1500, Los Angeles, CA 90010

If you are paying by credit card,

you may fax to: (213) 385-7599 or scan/email to: bventura@voala.org

If you have questions, or to donate by phone, please call Betty at: (213) 251-7618

VOALA Tax ID# 95-1691330