



California Council of **CHURCHES**

DONATION FORM

Name _____

Address _____

City/State/ZIP Code _____

Phone 1 | Phone 2 _____

Email _____

Contribution Amount: _____

_____ Monthly _____ Quarterly _____ Yearly _____ One Time

_____ Check (enclosed) _____ Credit Card

Credit card number _____ Exp. Date _____

Billing Address and ZIP code if different from above:

Authorized signature _____ Date _____

Electronic payments can be made online at calchurches.org

The California Council of Churches is a tax exempt 501(c)3 non-profit organization EIN 94-278-0260

California Council of Churches • PO Box 980981 • West Sacramento CA 95798-0981 • USA
916-488-7300 • calchurches.org
