



CWLC Donation Form

I would like to support the California Women's Law Center with a gift in the amount of:

Options for donation amounts: \$30, \$50, \$100, \$250, \$500, \$750, \$1000, or Other \$

This is a: Monthly Pledge or One Time Donation

Contributor(s)

First Name: LastName: Title:

Street: City: State: Zip:

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Payment by: Visa, Mastercard, American Express

Card Number: Exp. Date:

Credit Card Holder Information: (if different from above name & address)

First Name: LastName: Title:

Street: City: State: Zip:

Signature

I authorize California Women's Law Center to charge my credit card for the amount indicated above.

X \_\_\_\_\_ Date \_\_\_\_\_

Payment by: Check Make check payable to California Women's Law Center

Mail Form to: California Women's Law Center. 5670 Wilshire Boulevard, Suite 460 Los Angeles, CA 90036

We value your interest and thank you for your support! Contributions are deductible for income tax purposes in the amount over the value of any goods or services received.

The California Women's Law Center is a 501 C-3 non-profit organization - Federal Tax ID: 95-420449

California Women's Law Center ■ 5670 Wilshire Boulevard, Suite 460 ■ Los Angeles, CA 90036 ■ 323-951-1041 ■ CWLC.org