

In Honor/Memory Donation Form

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____

This gift is in : Honor _____ Memory _____

Of: _____

Send a notification to:

Name: _____

Address: _____

Enclosed is my gift of: \$ _____

Check _____ MC _____ Visa _____

Card #: _____

Expiration: _____ Security Code: _____

Name as it appears on card: _____

Signature: _____

Please keep a copy of this form for your records. Resonance's Federal Tax Exemption No. is 73-1023752

Resonance Center for Women, Inc.

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Resonance Center for Women, Inc., a 501(c)(3) nonprofit organization, provides services leading to self-sufficiency for women and families experiencing challenge, change or adversity in their lives.