

## DONATION FORM

Name:

Title:

Organization:

Address:

City:

State:

Zip:

Tel:

Fax:

Email:

Tax ID (optional):

***I want  
to donate:***

\_\_\_\_\_ \$25

\_\_\_\_\_ \$50

\_\_\_\_\_ \$75

\_\_\_\_\_ \$100

\_\_\_\_\_ Other

Type of Payment (Payable to):

**Lower East Side Family Union**

\_\_\_\_\_ Check

(Check # \_\_\_\_\_)

\_\_\_\_\_ Money Order

( \_\_\_\_\_ US Postal Money Order)  
( \_\_\_\_\_ Bank Money Order)  
( \_\_\_\_\_ Other)

Please Mail to:

**Lower East Side Family Union**

Attn: Resource Development

227 E. 3<sup>rd</sup> Street

New York, New York 10009

Federal ID#: 23-7412423

**THANK YOU FOR YOUR SUPPORT**