Yes! I want to help Foodlink feed the hungry.

Please mail your tax-deductible donation along with this form to:

California Emergency Foodlink 5800 Foodlink Street Sacramento, CA 95828



DONOR INFORMATION			
First Name:	Last Nam	ne:	
Address:			
			Zip Code:
Phone:	Email:		
Yes, I would like to receive online news and updates from California Emergency Foodlink.			
GIFT AMOUNT (Please check one) \$\text{\$\sumsymbol{\sum}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	100 🔲 \$50		Other Amount (please specify):
GIFTS IN HONOR/MEMORIUM			
Honoree First Name:	Last	Name:	
Please provide your honoree's address so that we may send a beautiful card acknowledging your gift. If your gift is in memoriam, please indicate the name of the person you want to receive notice of your gift.			
Name: (if other than Honoree)			
Address:			
			Zip Code:
PAYMENT OPTIONS			
☐ I have enclosed a check.	☐ I would pre	efer to	charge my contribution.
Card Type:	Card Number:	:	
Card Eyn (MM/YYYY):	Signature:		

Please make checks payable to California Emergency Foodlink. You will receive acknowledgment by mail within four weeks. Please note that you may donate, and receive an immediate receipt via email, online at: www.cafoodlink.org.

Thank you for your help!

California Emergency Foodlink is a 501(c)(3) non-profit organization recognized by the IRS. Your donation allows us to continue our mission to serve the food banks that feed California.

All donations are tax-deductible to the fullest extent of the law.

.

