

## Please complete the *applicable* fields on this form and return

**By Mail:** Arizonans For Children, Inc • 2435 E. La Jolla Drive, Tempe, AZ 85282 **By Email:** info@arizonansforchildren.org **Questions:** 480-838-0085 or visit our website at <u>arizonansforchildren.org</u>

Date				
Business Organizatio Individual _				
Program:				
Contact Person: _			Title:	
Address: _				
Phone: _		Cell:	Fax:	
Corporate Commi	ittee Contact:			
Donation Items(s	s):			
Gift Certific Gift Card(s Ticket(s) Cash/Chec Other (plea	) ck/Money Order			
Restriction Instruction Purpose	IS			
Donation Procu	rement:			
Mail				
Delivery Pickup	Date:		Time:	AM/PM
Contact Person:				
Instructions:				
Signature:	Ple	ase Make Checks Payable to "A		
		We are a 501 (c) (3) Non-Profit Ta	ax ID # 02-0651198	

Thank you for your Support!