

OBON SOCIETY

DONATION FORM

Please fill in the form below and return it with your payment to:

OBON SOCIETY
PO Box 282
Astoria, OR 97103

SUPPORTER INFORMATION

Name _____ Email _____

Address _____

City _____ State _____ Zip Code _____

Telephone (home) _____ (office) _____

Employer _____

Please add me to your mailing list Please send me information about volunteering

GIFT LEVEL INFORMATION

Please select an amount:

\$5.00 \$25.00 \$75.00
 \$10.00 \$50.00 \$100.00
 Other _____

PAYMENT INFORMATION

Check Enclosed Amount: _____

Credit Card (Visa/MC/Debit) Recurring Monthly

Number _____ Exp. Date _____

CCV _____ Signature _____

OBON SOCIETY is a gift dependent charitable initiative. Your generosity helps make our work possible. We are a 501(c)3 affiliate; Your donations are tax deductible:
AVA (Astoria Visual Arts) Fed. Tax ID 501(c)(3) #93-1010234

www.obonsociety.org