League of Women Voters Lansing Area

Contribution Form

Name		
Address		
City	State Zip Code	
Amount Enclosed \$	Phone (opt)	
Email Address		
I wish my contributio	n to remain anonymous.	
	n to be tax deductible where allowed by law. My check is made out to the "Leagu Area Education Fund" which is a 501(c)(3) organization.	ıe
I wish to support the l Lansing Area" and is not ta	League's action priorities. My check is made out to the "League of Women Voter ax-deductible.	S
Please mail check(s) to:	League of Women Voters Lansing Area P. O. Box 971 East Lansing MI 48826	

Comments:

Thank you for your support!