

MURRIETA VETERANS MEMORIAL

TAX DEDUCTIBLE DONATION TO SUPPORT THE VETERANS MEMORIAL

DONOR'S NAME: _____

STREET: _____

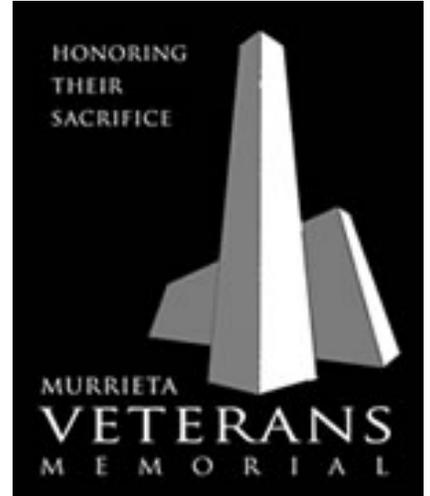
CITY: _____ STATE: _____ ZIP: _____

AREA CODE/HOME PHONE: _____

AREA CODE/MOBILE PHONE: _____

ENCLOSED PLEASE FIND MY ONE-TIME TAX-DEDUCTIBLE DONATION

PLEASE SEND ME MORE INFORMATION ON DONOR TILES



DONATION AMOUNT: \$ _____

IF PAYING BY CREDIT CARD

PLEASE CHARGE MY DONATION TO MY CREDIT CARD VISA MASTERCARD

CARD NUMBER: _____ EXPIRES: _____

NAME ON CARD: _____

SIGNATURE: _____

IF PAYING BY CHECK

PLEASE MAKE CHECK PAYABLE TO: MURRIETA VETERANS MEMORIAL

MAIL TO:

CITY OF MURRIETA
MURRIETA VETERANS MEMORIAL
1 TOWN SQUARE
24601 JEFFERSON AVE.
MURRIETA, CA 92562