

Donation Form

Donor Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Donation Amount Enclosed \$

In honor of

In memory of

Please send notification to:

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Yes, please add me to your email list and notify me of upcoming events

Please make check payable to: League of Women Voters of Sharon & Stoughton

And remit payment and this form to:

Anne Carney

41 Pole Plain Rd

Sharon, MA 02067

Or donate online at lwvss.org/donations/

Please note: This is not a tax-deductible donation