



THE CITY OF PALM SPRINGS
DONOR CONTRIBUTION FORM

DONOR INFORMATION

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail: _____

GIFT AMOUNT AND PAYMENT

- I/We wish to make a donation in the amount of \$_____.
- I/We wish to be acknowledged in promotional materials. Please provide the way in which you wish to be acknowledged for your donation:

- My check is enclosed and payable to: **The City of Palm Springs**

OTHER INFORMATION

- I would like to receive periodic emails about City of Palm Springs initiatives and events.
- I am interested in hearing about my options for leaving the City of Palm Springs a legacy gift.
- The City of Palm Springs has been remembered in my/our will or estate plan.

RETURN FORM TO

Please print and mail form to:

City of Palm Springs
Community & Economic Development
3200 E. Tahquitz Canyon Way
P. O. Box 2743
Palm Springs, CA 92263-2743

Attn: Donation Program Administrator

The City of Palm Springs is a legally qualified charitable beneficiary. The Federal Tax Identification Number for the City of Palm Springs is: 95-6000757. All gifts are tax deductible to the extent allowed by law.