



Donation Form

Save The Salt Inc. is a private, charitable 501c3 foundation EIN 87-0510087

Donor Information (please print legibly)

Name			
Billing address			
City	State	Zip	
Telephone (home/mobile)			
Telephone (business)			
E-Mail			

Donor names and logos/pictures will be posted on the Coalition page of our website with contributions of \$100 or more

Open Pledge Information

Donors will receive a tax-deductible receipt

I (we) pledge a total of \$ _____ to be paid: ___now ___monthly ___quarterly ___yearly

I (we) pledge to make this contribution in the form of: ___cash ___check ___credit card ___other

Credit card type	
Credit card number	
CSC Code (REQUIRED) <i>Visa/MC: 3 digits on the back of your card Amex: 4 digits above your account on the front of the card</i>	
Expiration date	
Authorization signature	

Please make checks, corporate matches, or other gifts payable to:

Save The Salt
C/O Michael LeFevers
702 Dunn Way
Placentia, CA 92870

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

___ I (we) wish to have our gift remain anonymous.

Signature(s):	Date:
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