

California Garden Clubs, Inc.

Donation Form

Date:			
Donor Nam	e:		
Address:			
	(Street or P.O. Box, City and Zip Code		
Telephone:		eMail:	
Please appl	y my donation to the PROJECT(S)	selected. You may select more than one.	
\$\$ \$\$ \$\$	President's Project 2023-25 "Building the Scholarship Fund" (31511g) Black Point Historic Garden (31523) Blue & Gold Star Memorials (31001) CGCI Endowment Fund (31806) CGCI Scholarship Endowment Fund (31811) CGCI Scholarship Fund (direct donation; not Life Membership) (31513) Conejo Valley Botanic Garden (31524) Sempervirens Fund (31518)		
• ———	_Total amount enclosed	Check number:	
Donations	s may be made in honor or in me	**************************************	
In Memory	of:		
Send acknow	wledgement to:		
Name:			
Address:			

Make check payable to: CGCI

Mail with copy of this form to:

California Garden Clubs, Inc. P.O. Box 823 San Fernando, CA 91341-0823