



# Donation Form

## The Joy Kingston Foundation

### Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

### Donation Information

I (we) plan to make this contribution in the form of:  
\_\_\_ cash \_\_\_ check \_\_\_ credit card \_\_\_ other.

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

### In-Kind Donation

Items Donated: \_\_\_\_\_

Value: \_\_\_\_\_

### Acknowledgement Information

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

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

Signature(s)
Date

Please make checks or other gifts payable to:

The Joy Kingston Foundation  
PO Box 1330  
Thousand Oaks, CA 91358