



**Los Angeles
Ronald
McDonald
House**

Donation Form

1250 Lyman Pl. Los Angeles, CA. 90029
Ph: (323) 644-3000 Fax: (323) 669-0552
Tax Id # 95-3167869

Name

Email

Address

City

State

Zip Code

Phone Number

Donation*

Check: Payable to L.A. Ronald McDonald House

Credit Card:

Amex

MasterCard

Visa

House Partner

\$25,000+

House Associate Benefactor

\$10,000-\$24,999

House Associate Sponsor

\$5,000-\$9,999

House Associate Friend

\$2,500-\$4,999

House Associate Member

\$1,000-\$2,499

\$500

\$250

\$100

\$50

\$ _____

Schedule of Payment

Annual – one payment for the full amount.

Semi-Annual – two equal payments to be paid in _____ and _____
Month Month

Quarterly – four equal payments to be paid in (Please circle one):

Jan/April/July/Oct

Feb/May/Aug/Nov

Mar/June/Sept/Dec

Monthly – twelve equal payments, one each month starting _____

Tribute

Memorial for: _____

In Honor of: _____

Address of Honoree: _____

City

State

Zip Code

Credit Card Information

Name as it appears on card: _____ Expiration Date: _____

Credit Card Number: _____

Today's Date: _____ Signature: _____

Please mail this form to the address above or fax it to (323) 669-0552

*Your donation is fully tax-deductible