



Mail-In Donation Form

Mail this completed form, along with your check or money order (if applicable) to Planned Parenthood of the Pacific Southwest. Thank you for your gift!

Donation Amount\* \$ \_\_\_\_\_

First Name\* \_\_\_\_\_

Last Name\* \_\_\_\_\_

Address\* \_\_\_\_\_ Apt. \_\_\_\_\_

City\* \_\_\_\_\_ State\* \_\_\_\_\_ Zip Code\* \_\_\_\_\_

Phone Number \_\_\_\_\_

E-mail \_\_\_\_\_

Yes, I would like to receive email from Planned Parenthood.

\* Required Field

Payment Information

My check or money order is enclosed. Make checks or money orders out to "PPPSW or Planned Parenthood". Please do not send cash as a donation.

My credit card information is below:

American Express     Discover     MasterCard     Visa

Credit Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Please mail your gift to:  
Planned Parenthood of the Pacific Southwest  
Attn: Development  
1075 Camino del Rio S  
San Diego, CA 92108

Please know that your contribution is tax-deductible to the fullest extent allowable under law. IRS regulations require us to state that we did not provide any goods or services to you in consideration of your contribution.