Low League of Women Voters South San Mateo County

| NAME: | | | |
|--------------|--|---------------|--|
| ADDRESS: _ | | ZIP: | |
| CITY: _ | | PHONE: | |
| EMAIL: | | | |
| YEARLY MEI | MBERSHIP DUES \$75 PER PERSON | | |
| NAME: _ | | Ś | |
| NAME: | | | |
| NAME: | | \$ | |
| - | | \$ | |
| The rest go | III part of your dues stays with LWVSSMC. bes to the Bay Area, CA and US Leagues. | | |
| Extra Contri | ibution to LWVSSMC's General Fund: | \$ | |
| TOTAL du | es and <i>non-tax deductible</i> contribution | I S \$ | |

If you would like to make a Tax-deductible contribution to our Education Fund, please make separate check out to: **LWVSSMC Ed Fund.**

Mail Form and Check(s) to: LWVSSMC PO BOX: 2244 MENLO PARK, CA 94026-2244