

COMMUNITY CONNECTIONS...it's about Time

**DONATION Form**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_

Contact \_\_\_\_\_

Please accept our donation of \$\_\_\_\_\_ to the Plumas Rural Services Community Connections service.  
We understand we will receive a tax receipt for our generous donation.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Full Name (first, middle, last) \_\_\_\_\_

Physical Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

**THANK YOU! Please return to:**



**PLUMAS RURAL SERVICES**

Serving People, Strengthening Families, Building Communities

**586 Jackson Street, Quincy CA 95971**

**530-283-3611**

**[www.plumasruralservices.org](http://www.plumasruralservices.org)**

**[communityconnections@plumasruralservices.org](mailto:communityconnections@plumasruralservices.org)**