

# JHCE Donation Form

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## Donor Information

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

## Donation Information

General contribution to JIMMIE HEUGA CENTER ENDOWMENT (JHCE)

- \$2500     \$1000  
 \$500     \$100  
 \$50     Other Amount

\$ \_\_\_\_\_

Donation In  Honor of     In Memory of

Name \_\_\_\_\_

Address \_\_\_\_\_

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

I wish to pledge \$ \_\_\_\_\_ per \_\_\_\_\_

## Payment Information

- Check Enclosed     Visa     MasterCard     American Express     Discover

Card Holder's Name \_\_\_\_\_

Card Number \_\_\_\_\_ Exp Date \_\_\_\_/\_\_\_\_ Security Code \_\_\_\_\_  
(CVV2)

Phone Number (\_\_\_\_) \_\_\_\_\_

Send this donation form and payment information to: JIMMIE HEUGA CENTER ENDOWMENT  
340 S. Lemon Ave., #7579  
Walnut, CA 91789

- I would like to receive more information on your events and programs

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

Any questions? Please email [donor@jhce.org](mailto:donor@jhce.org) or call us toll free at 1-888-506-0668.