

DONATION FORM FOR THE MARRIAGE BED, INC.

All information is optional, but we need a name and address if you wish to receive a year-end donation confirmation for your taxes.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

Amount Enclosed: _____

One Time Gift _____ Recurring Gift _____

E-mail Address _____

Check here to receive confirmation by email.

Check here if you do NOT want a donation confirmation – no email will be sent.

Comments or Prayer Request:

Thank you for your generous giving!

Mail to:

The Marriage Bed

4641 Lyons Hill Rd.

Springdale, WA 99173