

Donation Form

Name		
Mailing Addres	s (include city, state, zip)	
(Circle one) This is a	a HOME or WORK address	
Phone		
E-mail address		
Donations	Category	Amount
Your donation	1) Southern California Quarterly Endowment	1) \$
will be applied to the category	2) General Fund	2) \$
you select.		
	DONATION TOTAL:	\$
You may pay ei	supporting the HSSC. All donations are tax-deductible. ther by check or by credit card. ayable to Historical Society of Southern California.	
(Circle one) Vi	sa or MasterCard or Other	
Credit Card Nu	mber	
Expiration Date	e (MM/YY)	
Billing Zip/Pos	tal Code for the credit card	
Three Digit Sec	curity Code	
Card Holder Sig	gnature	
You may also so HSSC PO Box 50019 Long Beach, CA		

Email Executive Director Amy Essington at executive director@thehssc.org with any questions.