



**MARGARET TODD SENIOR CENTER  
MEMORIALS, REMEMBRANCES,  
AND DONATIONS FORM**

Enclosed is my tax-deductible contribution in the amount of \$ \_\_\_\_\_

Donor's Name: \_\_\_\_\_

Donor's Address: \_\_\_\_\_

\_\_\_\_\_

Please select one of the following:

In honor of: \_\_\_\_\_

In memory of: \_\_\_\_\_

On the occasion of: \_\_\_\_\_

Please send card to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we publish your name as a contributor?  Yes  No

Donations can be made in the form of a check or credit card. Please make checks payable to the "**Margaret Todd Senior Center.**"

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Please return form to: Margaret Todd Senior Center  
1560 Hill Road  
Novato, CA 94947

Or email: [mtsc@novato.org](mailto:mtsc@novato.org)

*Thank you for your contribution to the Margaret Todd Senior Center.*