

**CONSD Donation Form**

Name(s) \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip(+4) \_\_\_\_\_ Email \_\_\_\_\_  
Addr \_\_\_\_\_

Circle one Prayer Group or Parish

Pledge Amount \$ \_\_\_\_\_ monthly quarterly annually one-time gift

No credit cards accepted. Please make checks payable to "CONSD" Mail to: CONSD, Mary Williams,  
1241 Granite Rd., San Marcos, CA 92069