



of Sacramento and Northern California
Life without limits for people with disabilities

I want to make a difference for others:

Name _____

Address _____

City _____ State ____ Zip _____

Phone: _____

I am willing to organize a third party event:

(Event)

I am willing to help others putting together a third party event – please circulate my name to others. ___(yes) ___(no)

The fundraiser(s) I am most interested in are:

Organize an electronic waste recycling event ___(yes) ___(no)

Hold a car wash and/or yard sale ___(yes) ___(no)

Organize an event for UCP ___(yes) ___(no)

Sponsor a UCP event ___(yes) ___(no)

Or supply an auction item, volunteer

Other: _____

Thank you for your consideration of the needs of others Please complete and return this form to:

Mattison Hogan, Development and Marketing
4350 Auburn Blvd Sacramento, CA 95841
donate@ucpsacto.org Phone: 916-283-8317