



I'd like to make a single donation in the amount of:

☐ \$25 ☐ \$50 ☐ \$100 ☐ \$500 ☐ \$1,000 Other: _____

Name	
Street Address	
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☐ I am enclosing a check (made payable to National Food Museum) **Your donation is fully tax-deductible.**

Please mail your donation to:

NATIONAL FOOD MUSEUM
1275 4th Street, #371
Santa Rosa, CA 95404

Thank you!