



Membership Application

Your gift makes it all possible!

Your larger membership gift will help The Transit Coalition do more to advocate for better transit!

The Transit Coalition is a nonprofit public charity exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code.

Federal Tax ID: IRS EIN 95-4845170

Please include The Transit Coalition in your will, trust or estate.

Join today to receive the following benefits:

- A year's subscription to *Moving Southern California*
- A year's subscription to our weekly eNewsletter
- Representation at Southern California transit meetings
- Notification of urgent items needing your response

Dedicated to improving and expanding all modes of transportation in Los Angeles and throughout Southern California. Please join to allow our group to maintain and expand our valuable activities and make the Southland more livable.

Web: www.transitcoalition.org
Contact: info@thetransitcoalition.us

Make your tax deductible contribution payable to *The Transit Coalition* and mail this completed form to:

The Transit Coalition
P.O. Box 567
San Fernando, CA 91341-0567

- Fixed Income** \$ 20 to \$ 74
- Individual** \$75 to \$ 124
- Family** \$ 125 to \$249
- Partner** \$ 250 to \$ 499
- Organization** \$ 500 to \$ 999
- Patron** \$1,000 to \$2,499
- Corporation**..\$2,500 to \$4,999
- Sponsor** \$5,000 to \$9,999
- Supporting** \$10,000 or more
- Other (enter amount):** _____

Please help us by filling out this form with your most current contact information!

To use your credit card, see below or go to www.transitcoalition.org and Click on the *Donate* tab.)

For federal income tax purposes, membership dues and gifts to The Transit Coalition are deductible as charitable contributions.

Contact Information

Name: _____

Please fill out this form and mail along with your donation.

Address: _____

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City: _____ State: _____ ZIP Code: _____

Please include The Transit Coalition in your will, trust or estate.

Company: _____ Title: _____

Phone: _____ Email: _____

Mobile: _____ Fax: _____ Website: _____

Yes, I would like to contribute via credit card: Visa Master Card Discover American Express \$ _____
Gift Amount

Card #: _____ - _____ - _____ - _____ Expiration Date: ____ / ____ CSC: _____ Signature: _____

CSC = Card Security Code (see back of card)

Payments via credit card will appear as *The Transit Coalition* or *LACBC* on your statement.

Please make your check payable to *The Transit Coalition*, P.O. Box 567, San Fernando, CA 91341-0567

Keep this portion for your records!



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Check No.: _____ Date: _____ Visa Master Card Discover American Express

Gift Amount: \$ _____ Date Mailed: _____

Payments via credit card will appear as *The Transit Coalition* or *LACBC* on your statement.

Detach and mail the form above the dotted line along with your choice of payment.