



## Donation Form

**Please complete this form and mail to:**

**O'Connell Children's Shelter**

**PO BOX 3589**

**Lawrence, KS 66046**

**Any questions – Contact us at Telephone: 785-843-2085 (ask for Maren) or  
email: [marenl@oconnellcs.org](mailto:marenl@oconnellcs.org)**

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

Check box:

- Mr.
- Mrs.
- Ms.
- Miss.
- Dr.
- Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Donation Amount: \_\_\_\_\_ (Please make check payable to O'Connell Children's Shelter)

**Thank you for your generous support of O'Connell Children's Shelter. Your Receipt will follow in 3-4 weeks.**