Mollie Stone's Community Card Registration

ATTENTION CASHIER Affix card number here

you don't have your card. Please allow 3-4 weeks for phone number activation.

500003290

136588840

137616954

1. Select the group you wish to support

_ AIDS Walk San Francisco

__ American Red Cross Bay Area

___ Bay Area Community Resources

Note: If the group you wish to support is not listed below, please register your card at www.eScrip.com/molliestones or call 1-800-931-6258.

500030730 Pacific Diversified Services

143884024 Ross School

500015671 _____ Redwood High School Foundation

Big Brothers Big Sisters of North Bay	9198661	San Domenico School	136952800
Can Do!	137106563	San Francisco and Marin Food Bank	500030700
Casa Allegra Community Services	137956224	San Rafael High School	136556203
Center for Domestic Peace	500001601	Sir Francis Drake High School	138727345
Coleman School PTA	137331570	St. Anselm School	137330990
Community Institute for Psychotherapy	137629334	St. Hilary School	137965399
Davidson Middle School PTA	137105474	St. Isabella School	137105901
Early Childhood Educ-Osher Marin JCC	6635108	St. Mark's School	136558922
Glenwood School	137107027	St. Patrick School	137317143
Guide Dogs for the Blind	155279163	St. Raphael School	136952192
Hoffman Institute Foundation	500018528	St. Vincent de Paul Society Marin County	9549022
Kentfield Schools	139590409	Strawberry Preschool	500001485
Kiddo!	136550468	Sun Valley School	136550350
Larkspur School District - SPARK	136550371	Tam High Foundation	137140398
Laurel Dell PTA	137591000	Terra Linda High School Home/school Club	136556308
Marin Academy	118422229	The Branson School	137137911
Marin AIDS Project	3349369	The Foundation for Reed Schools	136925959
Marin Catholic	139422453	The San Francisco SPCA	500022192
Marin Primary and Middle School		Trinity Preschool and Kindergarten	140615266
Marin Rowing Assn Juniors Boosters	3492425 -	Venetia Valley K-8 School	137116553
Meals of Marin	3388173	Wildcare	10690701
Meridian Health Foundation	500002805	Yes Foundation Ross Valley Schools	5109569
*Other - School or nonprofit you wish to sup	port:		
city: GAN FAFAEL			
*If you choose "other" and write in a school or nonpr Bank to be your group beneficiary. You can access www.eScrip.com and clicking on "my eScrip". 2. Complete the following Please print clearly. All fields below as	and update this infor	mation and your personal profile at anytime by visi	Marin Food ting
Name:			
Email: Upon receiving introductory emails, yo		ortunity to "opt-out" of any future emails.	required to confirm your
Mailing Address:		15.	participation.
City:	State	e: Zip:	_
			_
Phone/Cell Number:		By providing a phone number	

www.eScrip.com/molliestones