

Year: \_\_\_\_\_

## SOUTHERN ILLINOIS AREA CONTRIBUTION FORM

Group Name \_\_\_\_\_

Group ID # \_\_\_\_\_

Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

District \_\_\_\_\_

City and State \_\_\_\_\_

Zip Code \_\_\_\_\_

Amount \_\_\_\_\_

Phone Number  
(if applicable) \_\_\_\_\_

Check # \_\_\_\_\_

**Please Make Check or  
Money Order to:  
SIAFG**

**Send to:  
JoEllyn Patterson  
6421 Ash Drive  
Moro, IL 62067  
(618) 799-9735**