



# Mail-In Donation Form

Center Pointe strives to provide the best for individuals with disabilities. You can imagine in our economic times that your help and support are in great need and appreciated.

## GIFT INFORMATION

Name \_\_\_\_\_ Business \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Email Address \_\_\_\_\_

## PAYMENT INFORMATION

Donation Amount (US \$):  \$25  \$50  \$100  \$250  \$500  \$1,000  Other \$ \_\_\_\_\_  
 Monthly donation(from-to) \_\_\_\_\_  One time donation  Please send me a tax receipt  
 My donation is enclosed. (Please make checks payable to Center Pointe)  
 My donation is designated for the June Jones Scholarship Fund.  
 Please charge my:  VISA  Master Card  Discover In the Amount of \$ \_\_\_\_\_  
Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ CSC Code \_\_\_\_\_  
Card Holders Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Signature \_\_\_\_\_

## HONOR OR MEMORIAL GIFT INFORMATION (OPTIONAL)

This gift is:  in honor of  in memory of \_\_\_\_\_  
Please complete the following if you would like an acknowledgement card sent to the honoree or family:  
Recipient Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Your Personal Message \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Center Pointe is exempt under Section 501(c)(3) of the IRS and this gift is tax deductible.

### Mail to:

Center Pointe  
1408 N. Washington  
Spokane, WA 99201

### Questions:

Call: (509) 325-5451