

**Alcohol & Drug Dependency Services
Charitable Giving - Donor Contribution Form**

To return your donation by mail, please send this completed form along with your check made payable to:

Alcohol & Drug Dependency Services
Attn: Diane M. Roelfs
1340 Mt. Pleasant Street
Burlington, IA 52601

Enclosed is my gift to Alcohol & Drug Dependency Services:

Donor Name: _____

Address: _____

City State Zip

Phone: () _____

Please accept my donation of:

\$100 \$50 \$25 Other \$ _____

This generous donation is being given as:

Tribute gift celebrating _____
(loved ones name to recognize)

Memorial donation honoring _____
(loved ones name to recognize)

Member of the family to notify of my gift:

Name _____

Address _____

City/State/Zip _____

Your contribution is tax deductible as provided by law.

THANK YOU for your generous support!