

FINANCIAL DONATION FORM

i would like to	become a cor	tributor to Goodwill. Please accept my gift of:	
	\$25 \$50 _	\$100 \$250 \$500 Other Amount \$	
□ My gift will be matched by my employer:			
Please choose yo	our payment op	ion below.	
I enclosed a check made payable to Goodwill of Western and Northern Connecticut Please charge the contribution to my credit card. □ VISA □ MASTERCARD □ AMERICAN EXPRESS			
Card Number:		Exp. Date:	
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		Date:	
Signature:		ormation below.	
Signature: Please complete First Name:	your contact in		
Please complete First Name: Company Nam	your contact in	formation below. Middle Inital:Last:	
Please complete First Name: Company Nam Address: City:	your contact in	ormation below. Middle Inital:Last:	

Mail this completed form to:

Goodwill of Western and Northern Connecticut Attn: Accounting Department 165 Ocean Terrace Bridgeport, CT 06605 Goodwill of Western and Northern Connecticut respects the privacy and confidentiality of all persons and therefore does not rent, sell, or exchange anyone's personal information including name, address, financial information, or any other information provided to Goodwill. Goodwill is a registered 501(c)(3) organization. All contributions to Goodwill are tax-deductible to the fullest extent allowed by law.