

FINANCIAL DONATION FORM

I would like to	o becon	ne a conti	ributor to	Goodwill.	Please ac	ccept my gift of:
	_\$25	\$50	\$100 _	\$250 _	\$500	Other Amount \$
□ My gift will	be mate	ched by n	ny employ	/er:		
Please choos	se your	payment	option be	low.		
I enclosed a check made payable to Goodwill of Western and Northern Connecticut. Please charge the contribution to my credit card. USA MASTERCARD AMERICAN EXPRESS						
 Card Number	î:				Exp	o. Date:
Signature: _					Da ¹	te:
Please complete your contact information below.						
						:
Address:						
						:

Mail this completed form to:

Goodwill of Western and Northern Connecticut Attn: Marketing 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.