



Susan B Anthony Recovery Center Donation Form

MISSION STATEMENT

The Susan B Anthony Recovery Center provides hope, help and healing for mother's and their children to live responsible, drug free lives.

TAX ELIGIBILITY

IRS No: 65-0583089
 Contributions to the Susan B Anthony Recovery Center are tax-deductible to the full extent of the law.

MAIL THIS FORM TO:

Susan B Anthony Recovery Center
 att: Development Office
 1633 Poinciana Drive
 Pembroke Pines, FL 33025

NAME		
ADDRESS		APT OR SUITE
CITY	STATE	ZIP CODE
TELEPHONE NUMBER WITH AREA CODE		
E-MAIL ADDRESS		
MY CONTRIBUTION IS <input type="checkbox"/> General Purpose <input type="checkbox"/> in Memory of <input type="checkbox"/> in Honor of <input type="checkbox"/> in Appreciation of		
Name & Occasion		
Please send a notice of my contribution (we do not specify amount) to: NAME		
ADDRESS		APT OR SUITE
CITY	STATE	ZIP CODE
Enclosed is my gift to support the work of Susan B Anthony Recovery Center <input type="checkbox"/> \$10 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$250 <input type="checkbox"/> Healing Circle \$500+ <input type="checkbox"/> other		
PAYMENT METHOD <input type="checkbox"/> Check <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
CREDIT CARD NUMBER	SECURITY CODE	EXPIRATION DATE
CARDS BILLING ADDRESS(if different from above)		
CITY	STATE	ZIP CODE

Thank you for supporting the Susan B Anthony Recovery Center