## childadvocates.

## General Donation Form

DATE:					
DONOR NAM	1E:				
ADDRESS:					
CITY / STATI	E / ZIP:				
HOME PHON	IE:	WORK PHONE:			
EMAIL:					
	<u>amount:</u> □ \$500		□ \$100	□ \$50	
FORM OF PA	YMENT:				
☐ Cash	☐ Check	☐ Please charge my credit card			
		☐ Ame	rican Express	☐ MasterCard	□ Visa
ACCOUNT N	UMBER:			EXP:	
SIGNATURE:					

Thank you for supporting Child Advocates and the children we serve!

Please mail this form to: 3701 Kirby Drive, Suite 400 Houston, Texas 77098

An official acknowledgement and tax donation receipt will be sent to you shortly. Child Advocates, Inc. is a registered 501(c)3 tax ID # 76-0111345.