



# DONATION FORM

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Please print this form and complete the information below to ensure proper preparation of your tax receipt. (Please print clearly.) To donate to a specific program or service, please write it in the memo line of your check.

If you would like to donate by credit card please visit [www.commteam.org/donate](http://www.commteam.org/donate).

Today's Date: \_\_\_\_\_

Check amount: \$ \_\_\_\_\_ (make payable to Community Teamwork, Inc.)

Donor Name: \_\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone # Home \_\_\_\_\_ Mobile \_\_\_\_\_

***My donation will go towards (select one):***

**Where it is needed most:** Support all of the urgent needs of low-income families in Merrimack Valley and beyond

**Specific CTI program or service** (please specify): \_\_\_\_\_

Dedicate my donation  in honor of  in memory of:

Honoree's name: \_\_\_\_\_

I would like my contribution to remain anonymous.

**Questions and Comments**

We welcome your questions and feedback.

Please feel free to contact us at **978.459.0551** or [giving@commteam.org](mailto:giving@commteam.org). Thank you for your support.

**Mail this completed form to:**

Community Teamwork  
Attn: Donations  
165 Merrimack Street  
Lowell, MA 01852



*Building Communities  
Changing Lives*