MAIL-IN DONATION FORM

Please print this form and complete the information below to ensure we can properly process and acknowledge your gift.

DONOR INFORMATION
Donor Name (First Name and Last Name):
____________________________________________________________________
Organization Name (Fill this out only if you’re making your donation on behalf of an organization):
________________________________________________________________________

ADDRESS INFORMATION
Address (If you’re making this donation on behalf of an organization, please provide the company’s address):
________________________________________________________________________
City:__________________________________________________ State:_____________ Zip Code:___________
Country:________________________________________________________________________
Email (optional):________________________________________________________________________
Telephone Number (optional):______________________________________ □ Home □ Mobile

By providing your email address and/or phone number, you will receive news and promotions and other ways to get involved with Centro Romero. You may unsubscribe at any time.

PAYMENT OPTIONS
One Time Gift Amount: ________________________________________________
☐ I’m enclosing my check made payable to Centro Romero
☐ Please charge my credit/debit card:
    ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover
Cardholder’s Name:_____________________________________________________
Card Number:_________________________________________________________
Expiration Date:________________________________________________________

I WANT TO SUPPORT
Please designate your gift to one of the following:

☐ Where It Is Needed Most: Support all of the urgent needs of Centro Romero.
☐ Youth Department ☐ Legal Services ☐ Adult Education ☐ Domestic Violence ☐ Family Services
☐ Other* (please specify):______________________________________________ Please also indicate the name of the specific cause on the memo line of your check (for example: “BRAVE Project”).
* If Centro Romero is not raising funds for the specific cause you have indicated and/or donations exceed Centro Romero expenses for that cause, your gift will be applied to Where It Is Needed Most.

Your questions and feedback are very important to us.
Please feel free to contact us at CentroRomero.org or call 1-773-508-5300. Thank you for your support.

Please mail this completed form to: Centro Romero | 6216 N. Clark St. | Chicago, IL 60660  EIN 36-3527401