



contact pittsburgh

Mail-in Donation Form

P.O. Box 9095
Pittsburgh PA 15224
412-820-0100 (office)
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www.contactpgh.org

**Please return this form with your credit card information
or check made payable to CONTACT Pittsburgh**

Please select: **Check Enclosed** **MasterCard** **Visa**

Donor Information

Name: _____

Address: _____

City: _____

State: _____ Zip: _____ - _____

If MasterCard or Visa:

Card Number: _____ - _____ - _____ - _____ Expiration Date: _____

Name on Card: _____ Cardholder Signature: _____

Amount of my tax-deductible gift: \$ _____

This gift is made:

In honor of: _____

In memory of: _____

On the occasion of: _____

Please send an acknowledgement of this gift to:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____ - _____

Thanks so much for your support of CONTACT Pittsburgh!