

Thank you for making a difference! Your gift will educate and empower a person with a disability and their family.

Dono	pr's Full Name				
Stree	t Address				
City			State	2	Zip Code
Home phone		Cell Phone		Email	
	This is a one-time gift.		(You	will be a monthly gift. can set up automatic payments by credit card the phone, online or in person.)	
Adop	ot a family! Pay for their s	ervices for one yea	ar, six month	s or one i	nonth:
	\$550 (one year)	□ \$275 (siz	x months)		\$46 (one month)
Your	donation amount			_	
	This gift is in honor of	someone special.	(TASK will co	ontact you	ı regarding proper acknowledgement.)
Wou	ld you like to speak to a p	erson? Contact th	e TASK office	e at (714)	533-8275. You can also visit us online

Would you like to speak to a person? Contact the TASK office at (714) 533-8275. You can also visit us online at <u>www.taskca.org</u>. To pay by check, mail this completed form with your check to:



## Thank you for supporting TASK!

Your contribution is tax-deductible. TASK is a 501(c)(3) organization (Tax ID# 95-3294319).