

Yes I want to help my neighbors in need! Enclosed is my gift of:

\$25 **\$50** **\$100** **\$500** **Other \$**_____

- I've enclosed my check, made payable to CEAP
- I wish to contribute via credit card
(Please complete back side)
- I've enclosed my corporate matching gift form. Please process my gift accordingly.

Donor Information:

First Name

Last Name

Phone #

Address

City

State

Zip

Email: _____

This donation is given in honor/memory of: _____

Please notify the following person of my gift:

Name

Address

City

State

Zip

Mail this form to: **CEAP • 6840 78th Ave N • Brooklyn Park, MN 55445 • 763-566-9600** *Donations are tax deductible.*

Please fill out **Donor Information** and **Gift Amount** on other side before proceeding.

I wish to charge my contribution on my:

Visa

Mastercard

American Express

Discover

Credit Card #

Exp. Date

Security Code (3 digits on back **OR** 4 digits on front of card)

Name as it appears on the card (print)

Cardholder Signature

Phone #

For every \$1.00 you donate to CEAP, 93 cents goes directly to helping those in need. CEAP's administrative costs are 7%, compared to the 30% standard for non-profits approved by the MN Charities Review Council.

Programs Supported:

Back to School

Clothing Closet

Client Advocacy

Emergency Financial Assist.

CEAP Transportation Solutions

Welfare to Work

Food Shelf

Senior Chores

Holiday Program

Homelessness Prevention

Information & Referral

Meals on Wheels