

## **Support Us**

Thank you for making a donation to CMA. After more than thirty proud years of service to individuals with intellectual and development disabilities and their families, we still have much work to do. Each contribution will help us to fulfill the promises we have made for the next thirty years. These promises include continuing to provide a high level of care to individuals with disabilities to live full and satisfying lives.

Thank you for investing in our future and theirs.

<u>Donation Information</u>			
Amount:	\$1,000	Designation:	Spring/Fall Appeal
	\$500		Golf & Tennis Tournament
	\$250		Independence Ball
	\$100		YLC Comedy Night
	\$50		Valentines Day Appeal
	Other		In Memory of / In Honor of
<b>Donor Inform</b>	ation:		Payment Information:
Name:			Check (payable to CMA)
Address:			Pledge
			Credit Card (MC/Visa/Amex)
Phone #:			Cardholder's Name:
E-mail:			Credit Card Number:
Relationship to CMA:			Expiration Date:
Solicited by:			
Additional Information:			
*My gift is in memory of:			Please mail form to: CMA
Acknowledgement to be sent to:			1025 Old Country Road, Suite 325
			Westbury, NY 11590
**My gift is in h	onor of:		Attention: Development Dept.
Acknowledgement to be sent to: _			