



Donation Form

- Yes! I want to Help WCCS Help Others in Warren County!**
- Yes! I want to help. Please use my gift to help** _____.

(Please choose: Adult New Readers, Early Learning Centers, Emergency Services, Meals on Wheels, RSVP Volunteer Program, The 741 Center, Senior Transportation, or Where Needed Most.)

Please print this form, complete, and send with your check or money order to:

**Attn: Help Us Help Others
WCCS
645 Oak Street
Lebanon, OH 45036**

Enclosed is my gift to help ensure that older adults, children, and families can live with independence and dignity.

Amount \$ _____

Name _____

Address _____

City, State, Zip _____

Phone _____

E-mail _____

My gift is:

In honor of _____

In memory of _____

My employer will match my gift. Matching Gift form enclosed.

Please do not publish my name or publicly acknowledge this gift in Annual Report, newsletter, etc.

All contributions are tax deductible to the extent allowed by law.

Thank you so very much!

Questions or Comments? Please contact the WCCS Executive Director/CEO at 513-540-9884.