



DRUG ABUSE TREATMENT ASSOCIATION, INC.

DONATION FORM

I'd like to give a gift to help children (circle one)

\$25 \$50 \$100 \$250 \$500 \$1000 Other: \$ _____

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If you have items to donate enter a brief description below:

What is the fair market value: _____

Donor Information:

Name: _____

Address: _____

Telephone: _____

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Donor Signature

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Drug Abuse Treatment Association, Inc. is a non-profit organization under 501(3)© status and all contributions to this agency are tax deductible.

Please mail or deliver to our Administration office at the address below.



Town of Palm Beach United Way
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ADMINISTRATION	561-743-1034	1016 CLEMONS STREET, SUITE 300, JUPITER, FL 33477	FAX 561-743-1037
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