



Thank you for your support!

I would like to be a sustaining monthly donor:

\$125/month \$50/month \$25/month \$10/month Other \$ _____

Please process my gift on the: 5th 20th

I would like to make a one-time gift:

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

Payment information

Check enclosed (make checks payable to COI)

Credit card

Card number: _____ Expiration date: _____

Signature: _____ Today's date: _____

Name: _____
(as it appears on card)

Name: _____
(as you would like it to appear in recognition)

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ Phone: _____

Please return to: Community Outreach, Inc. | 865 NW Reiman Ave. | Corvallis, OR 97330
Phone: (541) 758-3000

COI is a non-profit 501(c)(3) organization. (EIN/tax ID number: 93-0602094.)
Your donation is tax deductible to the full extent of the law. Please speak to your tax advisor for details.