



Please mail this completed form to:  
CSP  
601 Black Bears Way  
Tuscaloosa, Alabama 35401

## Donation Form

Please print this form and complete the information below to ensure proper preparation of your tax receipt (please print clearly). To donate to a specific program, please write the name of the program on the memo line of your check.

**Today's Date:** \_\_\_\_\_

**Amount of Check:** \$ \_\_\_\_\_ payable to CSP of West AL, Inc.

**Donor Name:** \_\_\_\_\_

**Organization Name** (if applicable): \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Country:** \_\_\_\_\_

**Email:** (optional) \_\_\_\_\_

**Telephone Number:** (optional) \_\_\_\_\_  Home  Mobile

Yes, you may contact me via phone with other ways to get involved with CSP.

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### Cause

Please mark with an "x" the program to which you would like to donate. This will enable us to apply your donation where you intend.

- Where It Is Needed Most:** Support the urgent needs of our service areas.
- Emergency Relief:** Help people affected by emergencies big and small (delinquent mortgage, housing emergency repair, flooding, etc.)
- Meals on Wheels Program**
- Housing Counseling**
- Head Start**
- Other\*** (please specify): \_\_\_\_\_

Please indicate the name of the specific program on the memo line of your check.

*Your questions and feedback are very important to us. Please feel free to contact us at [www.cspwal.com](http://www.cspwal.com) or call 1-855-211-0950. Thank you for your support.*

11/18/2015