Individual
-
100
-
(
_
-
11
-
-
4
, -
-
1
-
-
-
1
11
1
1
-
10
Carlo
1
-
1
11
1
1
1
-
0
0
0
1001
COT
DON
Don
nou
Don
Dong
Dono
Dono
Cono
Conor
Donor
Donor
Donor
Donor
Donor (
Donor (
Donor (
Donor C
Donor C
Donor Ci
Donor Co
Donor Ca
Donor Ca
Donor Ca
Donor Cai
Donor Car
Donor Car
Donor Car
Donor Care
Donor Cara
Donor Cara
Donor Card

☐ I pledge a total of \$

If Payroll Deduction:

Total Pledge

Amount per pay period \$

Number of pay periods

	_		200
	6	₩	
		Q	(Cash
			Check
			(Cash Check Payroll Deduction Monthly Debit*)
City, State, Zip	Home Address	Soc. Sec. #/Employee # (for payroll deduction only)	

	_
DIRECT GIFT	Contributor's Signatu
BILL ME: I want to	nature
o set up a "direct bill"	
total pledge in the a	
amount of \$	Date
	☐ DIRECT GIFT - BILL ME: I want to set up a "direct bill" total pledge in the amount of \$

Employer Name

DIRECT GIFT - ONE TIME: I want to make a one-time contribution in the amount of §.

*Monthly Debit is an electronic debit from your checking account.

DETACH AND MAIL:
Rogers County Adult Day Care
2608 N. Hwy 88 - Claremore, OK 74017

(918) 341-7588