

# Drop-In Center Donation

## I would like to make a contribution ...

I would like to provide a tax deductible contribution to the Mental Health America (a 501(c)3 organization) to help support the Drop-In Centers.

### Contact Information

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Alternate Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Profession \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

Print form and mail to:

MHA of East Central Florida, Inc.  
531 S. Ridgewood Avenue  
Daytona Beach, FL 32114

If you would like to make a contribution by MasterCard, VISA, American Express or Discover, you may also:

Phone: 386-252-5785  
Fax: 386-255-7560.