



**THANK YOU FOR SUPPORTING THE MAHONING COUNTY
CASA/GAL PROGRAM!**

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Zip: _____ Phone: _____ Fax: _____

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Check Enclosed Amount _____

Please make checks payable to **Mahoning County CASA/GAL**

Special Gifts

Please ask if your company or spouse's company has a **matching gifts** program to increase your contribution. Inquires can usually be made in the company's benefit office.

This gift is in honor of: _____

This gift is in memory of: _____

An acknowledgment of this gift should be mailed to:

Name: _____

Address: _____

City, State, Zip: _____

Your contribution is tax deductible. Thank you for your gift!

Mail form and payment to:

Mahoning County CASA/GAL Program
Martin P. Joyce Juvenile Justice Center
300 E. Scott St.
Youngstown, Ohio 44505

For any questions or additional information please call 330-740-2239

The Mahoning County CASA/GAL is a registered 501(c) (3) organization and a member in good standing with the National CASA/GAL Association.