

# To Make a Cash Donation to IMPACT CIL:

Your cash gift strengthens our ability to assist people with disabilities to live independently. Print this form and mail it to IMPACT CIL with your check, made payable to IMPACT CIL.

## Here is my gift of:

\$25\_\_\_\_ \$50\_\_\_\_ \$100\_\_\_\_ \$500\_\_\_\_ \$1000\_\_\_\_ Other\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ (Circle or highlight one) Voice    TTY    FAX

E-Mail: \_\_\_\_\_

## I would like to receive the following information: (Check the ones you want)

\_\_\_\_ Newsletters

\_\_\_\_ Event and Workshop Announcements

\_\_\_\_ Advocacy Updates

**Please fill out this coupon and mail, with your donation, to:**

IMPACT CIL  
2735 E. Broadway  
Alton, IL 62002

**Thank you for your support of IMPACT CIL!**