

CHANGE FOR LIFE RECEIPT REQUEST FORM

By filling a bottle with cash, check, or coins you are enabling Life Choices Center to provide free services to people facing unplanned pregnancies. **Thank you!**

For contributions over \$20: If you would like a receipt for this tax-deductible donation, please complete this form and place it in the bottle with your cash, check, or coins. Please make checks payable to Life Choices Center. Receipts will be mailed shortly after the conclusion of the campaign.

Name: _____

Address: _____

Phone number: _____

Email: _____

Location where you received this bottle: _____

Donation amount included in this bottle: _____

- Check here if you prefer **not** to be added to our mailing list.
 Check here if you prefer your email **not** be added to our email list.



93 Oak St. Binghamton | 607.205.8506
LifeChoicesCenter.org

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