



# CONTRIBUTION FORM

I am enclosing a contribution in the amount of: \$ \_\_\_\_\_

Please send an acknowledgment of my contribution to me at the following address: (Please print)

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

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

\_\_\_\_\_

**OR**

Please bill me for the contribution amount of: \$ \_\_\_\_\_

Bill this amount to:  
(Please print)

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

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

\_\_\_\_\_

My contribution is designated towards \_\_\_\_\_.  
(Complete this line if applicable.)

**All checks should be made out to Brantwood Children's Home.**

**Please return this form with your tax-deductible donation to:**

**Brantwood Children's Home  
1309 Upper Wetumpka Road  
Montgomery, Alabama 36107-1298**

**For additional information, call 334-265-0784.**