



YOUTH & FAMILY SERVICES

### DONATION FORM

*Please complete this form and then mail or fax it to:*

**SGA Youth & Family Services**  
**Attn. Daniel Dever, Dir. of Development**  
**11 East Adams, Suite 1500**  
**Chicago, IL 60603-6309**  
**Fax: 312-663-0644 Tel: 312-663-0305**

*PLEASE PRINT OR TYPE*

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

Name *(as you wish to be listed)*: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**GIFT BY CHECK**

Enclosed is a check for \$ \_\_\_\_\_ payable to **SGA Youth & Family Services**

**GIFT BY CHARGE CARD**

Please charge a gift of \$ \_\_\_\_\_ to my  VISA  MasterCard  AmExpress

Name as it appears on card: \_\_\_\_\_

Account Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**GIFT OF STOCK**

You may transfer stock to SGA's investment account at **Bernstein Global Wealth Management**,  
Account Name: **SGA YOUTH & FAMILY SERVICES** Acct No.: **888-32604** DTC No. **013**

Name of Stock: \_\_\_\_\_

Number of Shares: \_\_\_\_\_ Date of Transfer: \_\_\_\_\_

**MY/OUR GIFT IS:**

in memory of  in honor of  in celebration of \_\_\_\_\_

*Please send notification\* of this gift to:*

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

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

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

*\*the amount of your gift will remain confidential*

Remember to check with your employer about a matching gift to SGA.  
**THANK YOU FOR YOUR SUPPORT!**

*SGA Youth & Family Services is a not-for-profit, tax-exempt organization  
as defined under section 501(c)(3) of the Internal Revenue Code.  
SGA's Federal Identification Number: 36-2167916  
Contributions are tax deductible to the extent allowed by law.*