

DONATION FORM: MARIN INTERGROUP OF OA

Suggested donation is 60% of contributions after expenses and reserve. Please do not send cash.

Group Name _____ Group # _____

Meeting Day and Time _____

Total Amount Enclosed _____ Check/Money Order # _____

Mail check/money order to:

MARIN OA INTERGROUP
POB 3965
SAN RAFAEL, CA 94912

DONATION FORM: WORLD SERVICE OFFICE

Suggested donation is 30% of contributions after expenses and reserve. Please do not send cash.

Group Name _____ Group # _____

Meeting Day and Time _____

Total Amount Enclosed _____ Check/Money Order # _____

Mail check/money order to:

OA WORLD SERVICE OFFICE
POB 44020
RIO RANCHO, NM 87174-4020

DONATION FORM: REGION II

Suggested donation is 10% of contributions after expenses and reserve. Please do not send cash

Group Name _____ Group # _____

Meeting Day and Time _____

Total Amount Enclosed _____ Check/Money Order # _____

Mail check/money order to:

REGION II OF OA
4733 TORRANCE BLVD., PMB 335
TORRANCE, CA 90503