



2010 Annual Campaign Friends of the Center Donation Form

Please complete this form and
enclose it with your contribution.

Please make checks payable to:
Access to Independence
26 N. Main St.
Cortland, New York 13045

Name: _____

Address: _____

City State, ZIP Code: _____

Phone number: _____

E-mail address: _____

I want to support Access to Independence
by making a financial contribution!

Amount enclosed: \$ _____

*Access to Independence of Cortland County, Inc.
is a 501(c)(3) nonprofit organization under the
regulations of the Internal Revenue Service. All
contributions to Access to Independence are tax-
deductible to the extent provided by law.*

Thank you!

2009 - 2010 ATI Board Members

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Mary Betters
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**Nothing More,
Nothing Less
For All People
With Disabilities**

- I would like to receive your newsletter!
- I would like to volunteer!
- I would like to advocate for persons
with disabilities!
- I would like more information about:
_____!