

**Minnesota DA Intergroup
DONATION FORM**

Date _____

For Month/Year _____

Amount _____

Type of Donation: Meeting Individual
(please circle only one)

Make check or money order out to:
Minnesota DA Intergroup

Please mail to:
Minnesota DA Intergroup
P.O. Box 14901
Minneapolis MN 55414
952-953-8438

Meeting Name and/or Number _____

Name and address
to mail receipt to
(physical or email address) _____

Thank you for supporting Minnesota DA Intergroup!

**Minnesota DA Intergroup
DONATION FORM**

Date _____

For Month/Year _____

Amount _____

Type of Donation: Meeting Individual
(please circle only one)

Make check or money order out to:
Minnesota DA Intergroup

Please mail to:
Minnesota DA Intergroup
P.O. Box 14901
Minneapolis MN 55414
952-953-8438

Meeting Name and/or Number _____

Name and address
to mail receipt to
(physical or email address) _____

Thank you for supporting Minnesota DA Intergroup!