



**Langley  
Residential  
Support Services, Inc.**

*Because everyone deserves the chance to live a rich, full life...*

## Donation Form

**Enclosed is my donation to Langley Residential Support Services in the amount of \$ \_\_\_\_\_**

I would like my donation to be used for:

General Support       Life-Enrichment Activities/Programs

Other (Please Specify) \_\_\_\_\_

My donation is:

In memory of: \_\_\_\_\_

In honor of: \_\_\_\_\_

### Payment Information

Enclosed please find a check for the amount shown above, payable to L.R.S.S.

Please charge my credit card:  MasterCard  VISA

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date: \_\_\_\_\_ (mm/yyyy)

Billing Name on Credit Card: \_\_\_\_\_

Contact Name (if a Business): \_\_\_\_\_

Billing Address for Credit Card: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Signature of Credit Card Holder: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form with payment to the address below:

**Langley Residential Support Services  
2070 Chain Bridge Road, Suite G55  
Vienna, VA 22182**

***Thank you for your contribution!***