LAST NAME __________________________  FIRST NAME __________________________

ACCOUNT NAME ___ SEE COMMENTS ______  ACCOUNT NO. ___ SEE COMMENTS ______

PLAN _________________________________  AMOUNT ___ SEE COMMENTS ________

COMMENTS __ PLEASE DEPOSIT $75 AS FOLLOWS:

__________________________

_ALCOHOL & DRUG PROGRAM GIFTS__ ACCOUNT #220440-0079 $ 35.00

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_JUDICIAL AFFAIRS REVENUE__ ACCOUNT #230160-0079 $ 40.00

PAYMENT TYPE: CASH CHECK DEBIT CARD

CONTACT NAME __Veronica Ysaguirre__________  CONTACT EXT ___ X 6219