

**Overeaters Anonymous  
Mid-Hudson Intergroup  
Contribution Form**

Thank you for your contribution which makes it possible for the Mid-Hudson Intergroup to carry the message to those who still suffer from compulsive overeating.

Please mail form below with contribution to:

Mid Hudson Intergroup Treasurer  
3 Woodstock Estates Drive, #E10  
Woodstock, NY 12498

Please make checks payable to Mid-Hudson Intergroup

Group Name \_\_\_\_\_ Group # \_\_\_\_\_

Amount \_\_\_\_\_

Meeting Date & Time \_\_\_\_\_

Meeting Address \_\_\_\_\_

Meeting City \_\_\_\_\_

(The above information will help us to identify your group.)

Please put your FULL mail address on your envelope as well as on this form.

Please print CLEARLY IN THE BOX BELOW the name and title of the person to which acknowledgment should be mailed. Please indicate if email receipt is acceptable.

Receipt Form __Secretary; __Treasurer
Name: _____
Address: _____ _____
City: _____
State and Zip Code: _____
Phone number: _____ email address: _____ (electronic receipt saves postage and paper)