

Recurring Pledge Program

Please extend your helping hands to the 12 Step program that is helping you. ISO of COSA needs dependable income to do its work. Your monthly contribution provides the foundational support we need to support COSA's current members and to reach out to the COSA who still suffers.

Will you help by asking other COSAs to contribute as well?

Remember the 7th Tradition which states: Every COSA group ought to be fully self-supporting, declining outside contributions.

One time gifts are also welcomed!

This means that the support of COSA is up to us!



Name: _____

Address: _____

City: _____

State / Zip Code: _____ Country: _____

Telephone Number: _____

E-mail Address: _____

Here is my first contribution of \$ _____. I pledge \$ _____ per month.

Please check: I would like recurring billing _____. Please bill me _____.

Circle payment method: American Express Discover MasterCard Visa

Card Number: _____

Expiration Date: _____ (mmyy) Card Code: _____

Signature: _____ Date: _____

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All Donations to ISO of COSA are Tax-deductible