



COCAINE ANONYMOUS WORLD SERVICE OFFICE, INC.

11460 N. Cave Creek Rd., Suite 12
Phoenix, AZ 85020

1-310-559-5833 / cawso@ca.org

The World Service Office is responsible to the World Service Board of Trustees and the CA World Service Conference (consisting of Delegates from CA Areas throughout the Fellowship). Trustees of CA World Services, World Service Office Directors and staff members are directly governed by the CA group conscience. The Conference meets annually, and provides a link between the Groups within the Fellowship and the Trustees who serve as Custodians of CA Traditions and interpreters of policies affecting the Fellowship as a whole.



World Service Contribution Program

SAVE CHECKS! SAVE STAMPS! SAVE TIME! SAVE LIVES!

Cocaine Anonymous World Service depends on the financial support provided by individual members, groups, committees, districts, and areas. We use your contributions as efficiently as possible, to maximize the services we are able to provide to addicts throughout the World. When you participate in the World Service Contribution Program, you ensure that we are able to serve the needs of those in our fellowship, and reach even more with our message of Hope, Faith and Courage.

CA WORLD SERVICE WHERE YOUR MONEY GOES

The main service body for the Fellowship of Cocaine Anonymous is CA World Service, which is centered at the World Service Office in Los Angeles (California). There, employees and volunteers maintain communications with CA as a whole, and with persons outside of CA who turn to us for information about the program of recovery.

Here are just a few of the program services that your contributions make possible:

- Producing and stocking CA Literature, and filling orders from CA Areas and members
- Providing CA materials and information to new meetings and the media, and supporting the needs of members who have no nearby meetings
- Supplying *Hope Faith and Courage* books and other CA materials to inmates
- Providing administrative and planning support for World Service Convention and Conference events

7th *There are no dues or fees for membership; we are fully self-supporting through our own contributions.*
TRADITION

It's as easy as...



CONVENIENTEFFECTIVE When you participate in the CA World Service Contribution Program, your financial support allows World Service to fulfill its mission. And because your Contribution Program gifts are conveniently transferred by your bank from your checking account, savings account, debit card, or credit card account directly to the World Service Office, your contributions go farther than ever before:

- Our administration costs are decreased.
- Mailing delays are eliminated.
- Income becomes more predictable, helping World Services to make long-term, cost-effective decisions.

SAFESECURE The CA World Service Contribution Program is safe, secure and confidential. You have complete control of the process, because you specify the amount of your contributions, and when they are made.

FLEXIBLE You determine the amount and timing of your contributions. You can always increase, decrease or suspend your participation at any time by writing the World Service Office. And your contributions may be tax deductible (consult your tax advisor).

To help CA World Service Office meet the needs of members, groups, areas and addicts still suffering, please fill out the authorization form on the facing page, attach a voided check or deposit slip (if necessary), and mail everything to the address shown.



SEND YOUR COMPLETED FORM TO

**COCAINE ANONYMOUS
WORLD SERVICE OFFICE, INC.**

11460 N. Cave Creek Rd., Suite 12, Phoenix AZ 85020

QUESTIONS? CALL EMAIL

Phone 1-310-559-5833 / cawso@ca.org

AUTHORIZATION FOR DIRECT PAYMENT (ACH DEBITS)

YES! As a member of CA, I want to participate in the CA World Services Contribution Program to help keep CA World Services going strong!

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As part of my 7th Tradition contributions to Cocaine Anonymous World Service Office, Inc., I authorize Cocaine Anonymous World Service Office, Inc. (CAWSO), to initiate entries to my account described below:

Type of Account... Checking Savings Credit Card Debit Card

Credit Card or
Debit Card Name _____

Account Number _____

Routing Number _____

Expiration Date _____

Financial Institution's Name _____

Financial Institution's Address/Branch _____

If using a Checking Account, please include a voided check. If using a savings account, please include a deposit slip.

PAYMENT DETAILS

Amount in US Dollars... \$ _____ Date of first payment... 1st of Month 15th of Month

PAYMENT FREQUENCY

Monthly Annually One-time basis

Effective Date: ____/____/____ (MM/DD/YYYY)

This authority is to remain in full force and effect until CAWSO has received written notification from me of it's termination in such time and manner as to afford CAWSO a reasonable opportunity to act on it.

PLEASE PRINT NAME AS IT APPEARS ON THE ACCOUNT

Name _____

Signature _____ Date _____

Address _____

City _____ State/Prov _____ Zip/Code _____

Country _____

Daytime Phone _____ Evening Phone/Cell _____

Email _____

PLEASE MAKE A COPY OF THE COMPLETED FORM FOR YOUR RECORDS.