

SUSTAINER GIVING FORM

Our Mission is to strengthen northern Westchester neighborhoods by providing people safe and affordable places to live - **the foundation of a stable life.**



Your contributions in the last year alone have helped provide the following:

- Housing for **144** low income older adults, individuals with disabilities, single parent families and workforce residents.
- More than **1200** case management services. Examples of such work include daily living skills, budgeting and financial literacy, physical health, legal services and support navigating a complex web of benefit and assistance options.
- More than **300** home improvement projects which translates to an average of 18 projects in each of our 17 houses. Examples of projects include large scale weatherization updates, furnace replacement, snow plowing, painting, and other smaller routine upgrades such as lighting fixtures.

Name(s) _____
Address _____
City _____ State _____ Zip Code _____
Telephone _____ Email _____

For office use only:
Member ID _____

I'd like to make a _____ Donation _____ Memorial Gift _____ Honor Gift

In Memory/Honor of: _____

All donations will be applied to our General Giving Fund.

Please select the type of donation you wish to make:

___ Single\One-Time Gift ___ Monthly Gift ___ Quarterly Gift ___ Annual Gift

Please process my recurring donation on the: ___ 5th of the month OR ___ 15th of the month

Start Giving On: ___/___/___ (mm/yyyy)

Recurring Through: ___/___/___ (mm/yyyy)

In the amount of: ___ \$1,000.00 ___ \$500.00 ___ \$250.00 ___ \$100.00

\$ _____ Other Amount

___ *Yes! I wish 100% of my donation amount to go to A-HOME. I would like to pay the Donation Processing Fee (3% for Credit Card gifts) assessed to A-HOME.*

<i>For Office Use only:</i>	\$ _____ Processing Fee Amount (3% for Credit Card gifts)
	\$ _____ Total Gift Amount (Amount specified above + Processing Fee Amount)

___ Enclosed is a voided check for my donation. Please transfer my gift from my checking account.

OR

___ My credit card information is listed below for my donation. Please charge my gift to my credit card.

Credit Card Number _____ CVV# _____ Expiration Date ___ / ___



I understand my future donations will be transferred/charged directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift any time through the online donation form at www.a-homehousing.org or by contacting A-HOME by phone or mail. All donations provided to A-HOME originating as ACH transactions comply with U.S. Law.

Signature _____ (Required) Date _____

Please make a copy of this form for your records or you can request a copy from A-HOME.

Questions? Contact the Development Department at (914) 741-0740 x311