

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 16 buildings. Examples of projects include large scale weatherization updates, furnace replacement, snow plowing, painting, and other smaller routine upgrades such as lighting fixtures.

CONTACT

Name(s) _____
Address _____
City _____ State _____ Zip Code _____
Phone (____) _____ Email _____

GIFT INFORMATION

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

Comments: _____

PAYMENT INFORMATION

____ 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 _____ Expiration Date ____ / ____

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.

For Office Use Only
\$ _____ Processing Fee Amount (3% amount for Credit Card gifts)
\$ _____ Total Donation Amount (required)
(Donation Amount specified above + Processing Fee Amount)

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