

# Capital Campaign Donation Form

## Contributor Information

(Please print)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

*Please print exactly as you wish name(s) to appear for recognition purposes:*

☐ I/We wish to remain anonymous

## Pay in Full

☐ Enclosed is an unrestricted gift paid in full in the amount of \$ \_\_\_\_\_

## Pledge

☐ I/We are making an unrestricted gift in the form of a pledge \$ \_\_\_\_\_

to be paid over ☐ 1 year ☐ 2 years or ☐ 3 years and have enclosed the first installment of \$ \_\_\_\_\_

## Credit Card Payment

☐ To pay by Debit/Credit card go to: **commfoun.com** and click on "Donate," then select fund: **Mercy Mission House Emergency Shelter Fund**

## Payment/Other Options

☐ Please make check payable to The Community Foundation of Shelby County

☐ Contact me about a planned or deferred gift.

☐ Contact me about a naming opportunity.

☐ My employer offers matching gift opportunities.

☐ My gift is an honorarium/memorial gift, please see above recognition.

PLEASE MAKE ALL CHECKS PAYABLE TO MAIL TO:  
In the check memo please write:

The Community Foundation of Shelby County  
c/o Mercy Mission House  
100 South Main Ave., Suite 202  
Sidney, OH 45365

**THANK YOU** for supporting the Mercy Mission House Emergency Shelter!

*Contributions are tax-deductible as provided by law.*

