DONATION FORM



Yes, I want to secure the journey home for **individuals**, **families**, and veterans experiencing homelessness

	I/We agree to contribute a total gift of:
	\$
Name	The contribution will paid over a period of:
Address 1	□ 1 Year □ 2 Years □ 3 Years Other:
Address 2	Payable: ☐ Annually ☐ Semi-annually ☐ Quarterly ☐ Monthly
City State Zip	The 1st payment will commence on: Month Year
Email	How would you like your name to appear in capital campaign materials?
Phone	This gift is in honor or memory of:
Signature	☐ I/We give this gift anonymously
Date	THANK YOU for your pledge. We will send reminders on the schedule outlined above.
I/We plan to make the contribution to TLC, T	he Journey Home, in the form of:
☐ Check	
Checks should be made out to Tenfold with "1	The Journey Home" in the memo and returned
to Tenfold, PO Box 1676, Lancaster, PA 17608.	
If you prefer to make a one-time payment with	your credit card click here or SCAN the QR code.

Please direct questions to Phyllis Stacks at 717.358.9383 or phyllis@wearetenfold.org.