



I want to help the hungry and homeless in Union County.

Please mark all options that apply to your gift.

I am contributing \$_____ to support the Community Shelter's services.

____ Donor Name (Printed) Phone Date

____ Donor Signature Email Address

- My contribution is enclosed.
- Please bill my credit card. Please bill me in _____ (month.)
- I commit to a one-year pledge totaling \$_____.
- Please bill me in _____ installments.
- Please draft my bank account. (We will contact you for information.)
- Please bill my credit card.

____ Credit Card Number CVV Exp. Date

____ Name On Card ZIP

Please mail your form and check to
Community Shelter of Union County
Boots Sponsorship
160 Meadows St.
Monroe, NC 28110