

Yes! I want to help disabled and vulnerable homeless adults!

Enclosed is my tax-deductible contribution of:
 \$50 Sponsor \$100 Advocate \$250 Investor \$500 Partner
 \$1,000 Leader \$5,000 Benefactor Other: \$ _____

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

E-Mail _____

Charge my ___ MC ___ VISA Card # _____ Exp. ___/___

Cardholder Signature: _____

Yes! I want to make a monthly donation on my credit card in the following amount:
 \$10 \$25 \$50 \$100 Other Amount: \$ _____

THANK YOU FOR YOUR CONTRIBUTION!

- My company will match my gift. Paperwork enclosed.
- I want to donate stock or other publicly-traded securities. Please contact me.
- I would like my gift to remain anonymous.
- I would like to know more about volunteering at DESC. Please contact me.
- I have included DESC in my will or estate plan.
- Please send me information about planned giving.



Downtown Emergency Service Center
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