



Live Local Give Local 365 Middlesex County Community Foundation

Welcome and Thank You!

Your gift is tax deductible. Of the total amount, a portion will be used for grants this year. The remainder will be placed in the **Live Local Give Local 365** endowment to provide a growing source for continued community giving.

To donate by credit card, please see reverse.

To donate by check, please select a donation amount. Checks should be made to **Middlesex County Community Foundation**; in the memo line, please write **LLGL 365**. Please mail with this page with your check to: Middlesex County Community Foundation, 211 S. Main Street, Middletown, CT 06457.

_____ \$365 Annual Membership

_____ \$500 (or more) Above and Beyond Membership

_____ \$3,650 Lifetime Membership

_____ Other. Please specify amount. All donations are welcome and will result in more grants to the community.

Name(s)

Couples may have a joint membership (\$365). However, there is only one vote per household on grant-related issues.

Mailing address

Main email address

Alternate email address(es)

Daytime Phone

Please check here if you would like to remain anonymous. _____

May we welcome you on our webpage, blog, and other social media sites? _____

How did you hear about Live Local Give Local 365? _____

Philanthropy Matters. Philanthropy Works.
Thank you for being a
Great Person Doing Great Things!



MIDDLESEX COUNTY
COMMUNITY FOUNDATION

Credit Card Contribution Authorization

This contribution is for the benefit of the **Live Local Give Local 365** Fund at Middlesex County Community Foundation.

Name exactly as it appears on card

Billing Address

Phone Number

Please charge my

VISA

MasterCard

_____ \$365 Annual Membership

_____ \$500 (or more) Above and Beyond Membership

_____ \$3,650 Lifetime Membership

_____ Other. Please specify amount. All donations are welcome and will result in more grants to the community.

_____ For monthly payments, please check here to charge \$32 to your credit card on the 15th of each month for a total of \$384 over 12 months. (A fee of approximately \$1.60 per month is added to help offset processing costs.)

A monthly gift of \$ _____ for a total of \$ _____

Account Number _____ Exp. Date _____

Cardholder Signature _____ Date _____

Mailing Information for Donor Gift Acknowledgement (if different from above):

This gift is from: Donor Name(s)

Address

Thank You for Your Contribution!