## **Donor Appeal Letter**



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Program Assistant
Margie Costello,
Volunteer Coordinator

Program Address City state zip phone email Date

Dear Friend of XXX,

XXXX has been involved in activities that have helped 408 East King County residents with the **Gift of Independence** over the last six years. You are one of the many who has been a financial supporter to our community outreach. Local contributors are the primary source of funding for XXX although we consistently apply for grants to supplement our work. We are grateful when we receive a grant, but they are an unstable resource.

Because you have demonstrated support in the past, we are offering you an opportunity to become a founding member of xxx's "Circle of Friends," a group of people who understand the concept that a small amount, given consistently by many people, can accomplish great things! We are looking for a group of 100 friends who are willing to give \$25 or more per month. This will go a long way in meeting our operating needs and providing frail neighbors the **Gift of Independence**.

Enclosed you will find a special collage of pictures showing those whose lives have been changed by the giving or receiving of help through *xxx*, and 12 mailing labels that will help you remember them with your monthly gift or you may sign up at xxx to have funds automatically withdrawn from your account. A receipt for your records will automatically be generated.

Fill out the information below. Send it with your first donation to Yes, I would like to join the "Circle of Friends" with my contribution of \$10 (or more) per month.

Name:			
Address:			
E-mail:			
Circle One:	Check	<b>Credit Card</b>	Online
Circle One:	Monthly	<b>Bi-Annually</b>	Annually
Circle One:	<b>\$25 \$50</b>	\$75 \$120 O	ther
<b>Online Donat</b>	ions at www.	xxxx.org	