

Contribution Pledge Form for:
Tri-County Neighbors Helping Neighbors
2879 Hwy 160 West, PMB 4648, Tega Cay, SC 29708
www.tcnhn.com

Contribution Information (Your personal information is kept confidential)

Last Name: _____, First

Name: _____

Address: _____ City: _____ State: _____ Zip

Code: _____

Phone #: Home (_____) _____, Work: _____

A One-Time Donation in the Amount of:

____ \$5,000 ____ \$2,500 ____ \$1,000 ____ \$500 ____ \$100 ____ \$50 ____ \$25 ____ Other:

\$ _____

Repeat Donation as Follows:

A Sum of \$ _____ Once Every: () Month () Quarter () Year, Amounting to a Total of

\$ _____

Matching Contributions:

Method of Payment

() Check enclosed, Please make checks payable to: "Tri-County Neighbors Helping Neighbors"

() Please bill my credit card: On PayPal Card type: () Visa () Mastercard

Account Number: _____

Expiration Date: _____

() Contact me at : _____

NOTES

Contributions to TCNHN Organization are deemed charitable under section 501 (a) of the internal revenue code as an organization described in Section 501 (c)(3). U.S. Federal Tax ID #33-1128667.

Please consult your accountant for any clarification.

- Payments must be received before the end of the year to be eligible for tax deduction in that year.

Please forward completed form and payment to:

Tri-County Neighbors Helping Neighbors, 2879 Hwy 160 West, PMB 4648 Tega Cay, SC 29708

Would you like to volunteer your time, resources, or ideas to TCNHN Organization?

() Yes!

