

Journey of Hope Foundation

Bringing hope to those in need.



Please print and fill out this donation form; make your check payable to
Journey of Hope Foundation and mail it to:

Journey of Hope Foundation
200 River Road
North Tonawanda, NY 14120

Donation Amount:

I would like to make a donation of:

_____ \$1,000
_____ \$500
_____ \$250
_____ \$100
_____ \$50
_____ \$25

\$Other _____

Contact Information:

Name _____

Street Address _____

Suite/Apt Number _____

City _____

State _____

Zip/postal code _____

Country _____

Email _____

Daytime phone number _____

Many employers now match their employee' charitable contributions.

Ask your Human Resource or office benefits department if your company offers
this benefit.

A matching gift will do twice as much to help our cause and if your contribution is matched, it costs
you nothing.

Just mail your company's matching gift along with your contribution. We will take it from there.

Thank you for your generous gift.