

Hope Renewal Center for Men
Short Stay Expansion Project

Gift Commitment

Yes, I will partner with Hope Gospel Mission's **Short-Stay Expansion Project** to make a difference in the lives of hurting men in our community.

\$ _____ **Single Gift** | by _____ (date)

\$ _____ **Monthly Gift** | beginning in the month of _____ (for 2 years)

\$ _____ **Annual Gift** | over 2 years beginning _____ (year)

Payment Information

_____ Check Enclosed

_____ Credit card: Visa MasterCard Discover American Exp.

Name on Card: _____ Exp. Date: _____

Card Number: _____ Sec. Code: _____

_____ Gift of Stock (Processed free of charge by Orgel Wealth Management 715-835-6525)

Donor Information

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____ Email: _____

Signature: _____ Date: _____

My signature indicates approval of my giving commitment

Please make checks payable to:
Hope Gospel Mission
PO Box 1127, Eau Claire WI 54702
Telephone: (715) 552-5566 ext. 1300

