



Make a Donation

Your NAME(s)

STREET ADDRESS

CITY & STATE ZIP

PHONE 1

PHONE 2

E-MAIL 1

E-MAIL 2

Please Fill Out One or More of the Sections Below

SUPPORT A LOCAL ORGANIZATION

I (We) wish to support HomePorts as a Local Organization with a contribution of at least \$250 (per household)

Amount Enclosed \$1000 _____ \$ 500 _____ \$250 _____

IN MEMORY OF SOMEONE

I (We) wish to support HomePorts in Memory of someone (suggested contribution of at least \$250)

Amount Enclosed \$1000 _____ \$500 _____ \$250 _____

Other Amount _____

HELP WITH NECESSARY START-UP EXPENSES

I (We) wish to support HomePorts with necessary start-up expenses (suggested contribution of at least \$250)

Amount Enclosed \$1000 _____ \$500 _____ \$250 _____

CONTRIBUTION TO HELP COMMUNITY MEMBERS WITH LIMITED INCOMES

Amount Enclosed _____

Use of Your Name to Encourage Others. _____

Please check here if you do NOT want us to use your name in future mailings to encourage others.

Please make checks out to HomePorts, Inc.; P.O. Box 114; Chestertown, MD

All donations are fully tax-deductible.