



East End Cooperative Ministry's

Gifts of Hope

GIFT	COST	QUANTITY	TOTAL	GIFT CARDS*
Tutoring for a Student	\$15			
Bus Tickets for the Homeless	\$20			
Day Camp for a Child	\$25			
Lunch for the Hungry	\$25			
Fresh Produce for the Homebound	\$25			
Breakfast for the Homeless	\$35			
After-School Programs for a Child	\$50			
Food for a Family	\$50			
Medical Care for the Vulnerable	\$100			
Meals for the Elderly	\$125			
A Fresh Start for a Recovering Addict	\$250			
College Visit for a High School Senior	\$250			
Total Amount Enclosed:			\$	

* We are able to provide (1) card for each \$15 in gifts purchased.

CONTACT INFORMATION

Name: _____ Address: _____
(as you wish to be listed in the Annual Report)

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ I/we do not wish to be listed in the Annual Report.

METHOD OF PAYMENT

Please find my check payable to EECM enclosed

I prefer to charge my gift on:

MasterCard Visa

Card Number: _____ Expiration Date: _____

Security Code: _____ Amount: _____ Signature: _____

ACKNOWLEDGEMENT

Please send blank gift cards to me. Please send personalized gift cards to my recipient(s).

If additional cards are needed, please contact Sarah Villafuerte, Development Coordinator, at 412.361.5549 or sarahv@eecm.org.

RECIPIENT 1

Gift: _____

To: _____

Address: _____

City/State/Zip: _____

From: _____

RECIPIENT 2

Gift: _____

To: _____

Address: _____

City/State/Zip: _____

From: _____