



Deirdre's House
The Center for Morris County's Child Victims

www.deirdreshouse.org

There is always a moment in childhood when a door opens and lets the future in.
-Graham Green

Name: _____

Address: _____

Mail To:
Deirdre's House
8 Court Street
Morristown, NJ 07960

Thank you for your support!

To help close the door on hurt and pain, and open a window of hope and healing, I have enclosed the following tax deductible gift:
(Fed ID #22-3308574)

\$100 \$500 \$1000 \$5000 Other \$ _____

To be paid: Annually Semi-Annually Quarterly Monthly-Starting ____/____/____

Use my gift for:

wherever it is needed most

D.E.A.R. Camp

S.H.I.N.E

Homework Helpers

Endowment

I make my gift in memory of:

I make my gift in honor of:

Please make checks payable to:

Deirdre's House

Please acknowledge my gift to:

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Payment Type: Visa Mastercard Amex Check

Card #: _____ Exp. Date: _____

Cardholder's Signature: _____

I would like more information about planned giving options (wills, trusts, bequests).

My company has a matching gift program. I have enclosed the form:

Please send me information on making donations of stocks, frequent flier miles, or program reward points.