



Homes For Our Troops

6 Main Street
Taunton, MA 02780

- Please apply my donation to where it is needed most
 Please apply my donation to (Veteran project): _____

Name: _____

Organization (optional): _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Email: _____

Donation amount: _____

My Donation is (circle one): **One Time** or **Monthly**. If monthly, please charge on the (circle one) **1st** or **15th** of each month.

Check: Please make your check payable to **Homes For Our Troops**.

Credit Card

Credit Card Type (Circle one): Visa MasterCard American Express Discover

Credit Card Number: _____ Expiration Date: _____

Signature: _____

If you are using your employer's Credit Card, please list your employer's name: _____

Checking account debit (please attach voided check):

Checking Account Number: _____ Routing Number: _____

Signature: _____

Tribute Information (optional):

I would like to make my donation *in honor* or *in memory of* (please circle one):

Tribute name: _____

Send notification of this gift to (optional):

Name: _____ Address or Email Address: _____

City: _____ State: _____ Zip: _____

Message: _____

*This form gives Homes For Our Troops authorization to directly charge my bank account or credit card for the above donation(s).
The suggested minimum is \$15 for our monthly giving program.