



THANK YOU FOR SUPPORTING A NEW HOME FOR FAMILY HOUSE

To assist Family House in support of its capital fund raising program, I/we hereby subscribe and agree to pay the sum of \$ _____, or give the following securities or other property: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Please make checks payable to
FAMILY HOUSE
All gifts are deductible for tax purposes.

I/We would prefer to make payments over a period of ___ 3 years ___ 5 years in the following manner:

___ Annually ___ Semi-Annually ___ Quarterly

or as follows: _____

Beginning on or about _____ 20

Signature: _____ Date: _____

Family House is a 501c3 non-profit organization serving those in need of lodging while loved ones receive care in Peoria area hospitals.

**1509 N. Knoxville Avenue
Peoria, IL 61603
(309) 685-5300
www.familyhousepeoria.org**