



Please print and mail this form with your contribution to:

NEXT STEPS 4 SENIORS FOUNDATION  
445 S. Livernois, Ste. 202  
Rochester Hills, MI 48307

Enclosed is my gift of: \_\_\_\_\$500 \_\_\_\_\$250 \_\_\_\_\$100 \_\_\_\_\$50 \$\_\_\_\_OTHER

Type of payment: \_\_\_\_Check \_\_\_\_Visa \_\_\_\_MasterCard \_\_\_\_American Express

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Make checks payable to:** Next Steps 4 Seniors Foundation

Please check here if you want your gift to be anonymous

**DONOR NAME:** \_\_\_\_\_  
(Print your name as you want it to appear on the donor listing)

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address: \_\_\_\_\_

\* \* \* \* \*

**TRIBUTE GIFTS:**

This donation is made:  In memory of \_\_\_\_\_  In honor of \_\_\_\_\_

Name: \_\_\_\_\_

Please notify the following person with a letter of acknowledgement:

Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

***Thank you for supporting our mission to make sure our vulnerable seniors are not forgotten!***

A tax-deductible receipt will be mailed to you. \*Next Steps 4 Seniors Foundation is a 501 (c)(3)