

## Tax-Deductible Donation Form

<b>Donor Information</b>	
Title   First   Last Name (s	)
Address	
Phone	Email
Gift Information	
Enclosed is my gift of \$	to the following area:
<ul> <li>Givens Cares Res</li> </ul>	sident Assistance Ministry (financial assistance for residents with limited means)
<ul> <li>Joy Fund for Resi</li> </ul>	dents (helps residents with personal needs: hearing aids, dental work, class tuition, etc.)
<ul> <li>Team Member As</li> </ul>	sistance Fund (helps team members facing financial crisis or other significant burdens)
<ul> <li>Givens LifeMinist</li> </ul>	ries Outreach (a faith-based health ministry creating programs and proving resources fo
local churches and	communities to touch more than 10,000 lives annually)
<ul> <li>Givens Grows (un</li> </ul>	restricted fund to support areas of great need)
• Other	
TI: :	
This is a tribute gift recog	
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• In honor of	
Dlassa natify the followin	g of my tribute gift (name and address):
Please notify the followin	g of my tribute git (name and address):
<del></del>	
Signature	Date

Please make checks payable to Givens Communities and mail your gift with this form to:
Givens Philanthropy
2360 Sweeten Creek Road
Asheville, NC 28803