



D A S H

DISTRICT ALLIANCE FOR SAFE HOUSING



Commitment Form

I am pleased to provide financial support for the District Alliance for Safe Housing's Journey Home Campaign. My contribution is above and beyond my annual gift.

Total Campaign Donation \$ _____

DONOR CONTACT INFORMATION

Name _____
Address _____ City _____ State _____ Zip Code _____
Phone _____ Email _____

PAYMENT SCHEDULE (PLEASE CHECK ONE)

Denote amount(s) and payment schedule below.

One-Time Gift _____
 Pledge:

| YEAR | GIFT AMOUNT | ANNUALLY | SEMI-ANNUALLY | QUARTERLY | MONTHLY |
|------|-------------|----------|---------------|-----------|---------|
| 2020 | | | | | |
| 2021 | | | | | |

PAYMENT METHOD (PLEASE CHECK ONE)

Enclosed is my gift Charge my credit card for a one-time gift
 I will mail in a check(s) payable to DASH Charge my credit card for recurring gifts

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) _____
Credit Card Number _____
Expiration Date _____ CVV Number _____ Zip Code _____

RECOGNITION

Name(s) for recognition in campaign materials _____

DONOR AGREEMENT

Signature _____ Date _____

Please return this form to **Meghan McDonough**, Director of Development
Email: MMcDonough@dashdc.org
Mail: DASH, PO Box 91730, Washington, DC 20090