



Agape Community Center  
MINISTRY HEALTH CARE



**Thriving People. Vibrant Neighborhoods.**  
*Together we will make it happen.*

**Donation Form**

Please accept my contribution of:

\$25    \$50    \$100    \$150    \$250    Other \$ \_\_\_\_\_

**Make your check payable to:** Agape Community Center

*Your gift is tax deductible to the full extent allowed by law.*

Please list my gift as “anonymous”

My employer will match my gift. I have enclosed the proper form.

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

Address: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

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

Gifts may be made in memory of or to honor a family member or friend.

In honor of: \_\_\_\_\_

In memory of: \_\_\_\_\_

*We will send an acknowledgement of your memorial/honorariums/to family member or friend. Please enclose their name(s) and address with your contribution. The amount of your gift will remain confidential.*

Please mail your contribution with this form to:

Agape Community Center  
6100 North 42<sup>nd</sup> Street  
Milwaukee, Wisconsin 53209  
Attention: Development Office

I'd like to get involved at Agape Community Center. Please contact me about volunteer opportunities.

We also gratefully accept in-kind donations. Agape Community Center needs:  
Snow Blower, Industrial Vacuum Cleaner, Big Screen Television, New Tables and Chairs for Activity Room, Pool Table or Ping Pong Table (or combination), and Sewing Machines.

Please call Agape Community Center's Development Office for details (414) 464-4440 ext. 230