



Join our mission to empower families affected by ALS to Live Every Day.

## Individual Giving Opportunities

What your generosity is making possible:



**1** year of in-home care for two individuals or families  
**10** home assessments

**1** year of in-home care  
**6** months of transportation for multiple individuals or families



**6** months of in-home care  
**5** home assessments

**3** months of in-home care  
**6** months of transportation



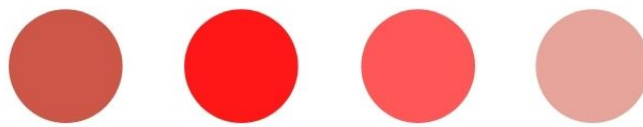
**1** month of in-home care  
**3** months of transportation

**3** home assessments  
**3** months of transportation



Your gift makes a significant difference to us.

To show our thanks, we offer a tiered appreciation package at each level. Please see our Sponsorship Package online (donation website link, opposite) for details about how we will highlight your gift, its impact, and stay in touch with you over the coming year.



Your response on or before September 30th,  
2020 is appreciated. Thank you!

Contribution Amount: \$ \_\_\_\_\_

Gift eligible for matching funds? Y/N

My gift is made in honor/memory of

\_\_\_\_\_

Contribution via credit card (online or  
information entered here)

Card #: \_\_\_\_\_

Expiry:        /        CVV:

(Please fill name and address associated with payment card  
below)

Check enclosed

Pledge made online by 10/30/20  
(see donation web link at bottom)

Name(s)

\_\_\_\_\_

E-Mail

\_\_\_\_\_

Phone \_\_\_\_\_

Street Address

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

May we add you to our mailing list for periodic updates?  
Yes / Opt Out

**Personal information will not be shared outside of  
the organization.**

The Joe Martin ALS Foundation  
100 N. Tryon Street, Suite 3420  
Charlotte, NC 28202  
(704) 332-1929

[www.joemartinalsfoundation.org/donate/](http://www.joemartinalsfoundation.org/donate/)

