

**YES, I/We wish to support One Roof Community Housing's efforts to provide quality, affordable home ownership opportunities.**

**Enclosed is my/our tax-deductible annual membership:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> \$1,000 or more Ambassador Membership | <input type="checkbox"/> \$250 Steward Membership    | <input type="checkbox"/> \$25 Basic Membership          |
| <input type="checkbox"/> \$500 Advocate Membership             | <input type="checkbox"/> \$100 Sustaining Membership | <input type="checkbox"/> \$1-\$24 Affordable Membership |
| <input type="checkbox"/> \$350 Corporate Membership            | <input type="checkbox"/> \$50 Supporting Membership  | <input type="checkbox"/> Other \$ _____                 |
- \$10/Month Here for Good Recurring Donation

- I prefer to be listed as a donor. (Membership benefits include the right to vote at organizational meetings. Donors do not.)
- I would like to be listed as an anonymous member/donor in the One Roof Annual Report.

***Or, donate securely on-line by going to [1roofhousing.org/support-us](https://1roofhousing.org/support-us)***

**A2023**

Name(s) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City State Zip

**Payment:**

- My check or money order is enclosed made payable to One Roof Community Housing.
- Please send me information about estate planning options.  I/We have included One Roof Community Housing in our estate plans.
- One Roof may occasionally share our mailing list with like-minded organizations.  Please do not share my name with other organizations.*