

Chico Community Shelter Partnership
TORRES COMMUNITY SHELTER
Providing Shelter & Related Services Since 1998
101 Silver Dollar Way, Chico, CA 95928
Telephone: (530) 891-9048 Website: www.chicoshelter.org

Please Join *People Helping People!*

➤ What is *People Helping People*?

It's a group of Torres Shelter supporters donating \$10 or more each month.

➤ Why support us?

We help people 365 days a year! In 2009 we provided over 20,000 nights of shelter.

We are the largest homeless shelter in our area, with 120 beds. We have 2 large dorms for men and women, and 5 private family rooms. On average, about 75 people of all ages stay at the shelter each night. We offer case management to help people get back on their feet.

➤ Why do we need monthly supporters?

Monthly supporters provide a steady, stable source of funds to help keep the doors open! It takes about \$360,000 each year to operate the Shelter. We receive agency funding for about 1/3 of our expenses, but have to raise the remainder.

➤ How do I sign up for *People Helping People*?

1. Visit our website at www.chicoshelter.org where you can sign up to have monthly donations charged to your credit card; or
2. Fill out the form on the back side of this flyer to have donations come out of your bank account automatically; or
3. Send in a monthly check if you prefer.



Yes I want to join *People Helping People!* You can count on me for:

_____ \$10 per month

_____ \$25 per month

_____ \$100 per month

_____ \$500 per month

_____ I'd like to donate \$_____ per month.

_____ I'd rather make one donation. Here is my \$120 for the year!

_____ I'd like to make a one-time donation of \$_____.

Name: _____

Address: _____

Thank you for your support!

If you would like your donation to be automatically deducted from your bank account each month, please fill out the form on the reverse side of this flyer.

Bank Authorization Agreement for Direct Donations to CCSP's Torres Community Shelter

Authorized Debit Entries: You are authorized to originate Debit Entries to my Account to pay recurring amounts pledged by me on the 5th day of the month (or business day preceding that day if that day is not a business day.) The amount of these recurring payments will be \$_____ per month.

My Financial Institution Name: _____

Financial Institution Address or Branch: _____

Account Number: _____ Savings [] or Checking []

Bank Routing Number: _____

Name(s) on the Account: _____

Signature: _____

My Address: _____

If you are authorizing an automatic donation from your account, please attach a voided check and mail this form to either Brad Montgomery, Torres Shelter Executive Director, 101 Silver Dollar Way, Chico, CA 95928 or directly to our CPA, David W. Matson, 2571 California Park Drive, Suite 100, Chico, CA 95928. We'll send you a copy of this completed form for your records.

Thank you for joining *People Helping People!*

Here's the "fine print" for the bank authorization.

I hereby certify that I am an owner and authorized signer of the Account. I acknowledge receiving a copy of this authorization. You may supply a copy of the Authorization Agreement to my Financial Institution or to your bank upon request. I authorize you, Chico Community Shelter Partnership, to initiate ACH Debit entries ("Debit Entries") to my deposit account ("Account") at my Financial Institution named below. This authorization is for recurring payments that I pledge to you. In order to terminate or revoke this authorization, I must notify you, the originating company, in writing. So long as this authorization has not been terminated or revoked, any Debit Entry originated by you under this authorization shall be conclusively presumed to be properly authorized for debit to my Account. I understand that if my Account is closed, my Financial Institution cannot accept any Debit Entry and the entry will be refused. If this occurs you will not be able to reprocess the Debit Entry without further written authorization from me. I also authorize Chico Community Shelter Partnership and Butte Community Bank to make adjustment entries in the event of erroneous transactions to my account. I authorize my Financial Institution to accept these Debit Entries to my Account upon receipt and without advice to me. Please send all notices/advices to the address shown below my signature on this flyer.

Please visit our website at www.chicoshelter.org
or follow us on Facebook at www.facebook.com/TorresShelter