



The Mental Health Association of
Fauquier County
PO Box 3549
Warrenton VA 20188

Thank you for your generous financial contribution to support the Mental Health Association's work in the coming year. Your tax-deductible contribution to MHAFC will enable us to provide assistance to at-risk young people in local schools, to provide housing supports for adults in recovery from mental illnesses, to provide information and education about mental health issues to local residents, and to refer individuals and families to treatment and community resources as needed.

Thank you for helping us to promote mental health and wellness for everyone in our community.

Enclosed is my gift of:

- | | |
|--------------------------------|--------------------------------------|
| <input type="checkbox"/> \$35 | <input type="checkbox"/> \$500 |
| <input type="checkbox"/> \$50 | <input type="checkbox"/> \$1000 |
| <input type="checkbox"/> \$100 | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> \$250 | |

Please print this form, complete the Information below and mail it to the address at the top of the page. Thank you for your generous support.

Name: _____

Business or Organization: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Telephone Number: _____

Email: _____