

Step 1: Amount of Contribution

Fill in the amount you would like to contribute to each fund

\$ <input type="text"/>	Trillium Family Solutions General Agency Fund <i>Your gift will benefit ongoing Trillium Family Solutions program needs</i>
\$ <input type="text"/>	Colleen B. Schwabe Memorial Fund <i>Your gift will benefit the Deaf Community Services program</i>
\$ <input type="text"/>	Positive Living Fund <i>Your gift will benefit the HIV/AIDS program</i>
\$ <input type="text"/>	Family Legacy Endowment Fund <i>Gifts of \$1,000 or more</i>
\$ <input type="text"/>	Planned Gift to Trillium Family Solutions <i>Contact Scott Erikson to contribute a planned gift</i>
\$ <input type="text"/>	Total Contribution

Step 2: Contributor Information

FIRST NAME		MI
LAST NAME		
ADDRESS		
CITY	STATE	ZIP

Step 3: Payment Information

PAY BY: cash check

Step 4: Return Form and Payment

Please bring or mail all contributions, along with this form, to Trillium Family Solutions' Canton Office.

Trillium Family Solutions
101 Cleveland Avenue NW
Suite 300
Canton, OH 4470