

HALO HOUSE FOUNDATION
CAPITAL CAMPAIGN – EXPANSION
NAMING & DEDICATION OPPORTUNITIES 2024



CONTACT INFORMATION (PLEASE PRINT)

DONOR'S NAME _____
 ADDRESS _____
 CITY _____ STATE _____
 ZIP _____ PHONE _____
 EMAIL _____

NAMING AND DEDICATION OPTION(S)

- | | |
|--|--|
| <input type="checkbox"/> GUEST LOUNGE (3 TOTAL) \$300,000 | <input type="checkbox"/> GARDEN TREES (6 TOTAL)\$10,000/EA |
| <input type="checkbox"/> WEST GARDENS \$200,000 | <input type="checkbox"/> GARDEN BENCHES (4 TOTAL)\$15,000/EA |
| <input type="checkbox"/> GAZEBO \$150,000 | |
| <input type="checkbox"/> BUSINESS CENTER (BLDG 1)..... \$100,000 | APARTMENTS |
| <input type="checkbox"/> RECEPTION DESK \$50,000 | <input type="checkbox"/> 1 BEDROOM APT (26 TOTAL) \$35,000/EA |
| <input type="checkbox"/> ELEVATOR \$50,000 | <input type="checkbox"/> FURNISHINGS FOR 1 BR APT (26 TOTAL) \$20,000/EA |
| <input type="checkbox"/> BUSINESS CENTER\$40,000 | <input type="checkbox"/> FURNISHINGS FOR 2 BR APT (4 TOTAL) \$25,000/EA |
| <input type="checkbox"/> DEVELOPMENT CENTER \$30,000 | |
| <input type="checkbox"/> LAUNDRY ROOM \$15,000 | |

PAYMENT INFORMATION

I/WE WOULD LIKE TO SUPPORT HALO HOUSE WITH A DONATION OR PLEDGE IN THE AMOUNT OF \$ _____
 MY GIFT IS TO BE USED IN HONOR OF OR IN MEMORY OF _____

- I WOULD LIKE TO PAY IN FULL -OR-
 I WOULD LIKE TO PAY A PORTION NOW, AND THE BALANCE OVER TIME (30 MONTHS MAXIMUM). MY PLEDGE WILL BE PAID AS

FOLLOWS:

MY INITIAL PAYMENT WILL BE \$ _____

THE REMAINDER WILL BE PAID

ANNUALLY OVER 2 YEARS AT \$ _____ /YR. QUARTERLY AT \$ _____ /QTR. MONTHLY AT \$ _____ /MO.

PAYMENT METHOD (CHECK ONE)

- I WILL MAIL OR DROP OFF A CHECK TO **HALO HOUSE FOUNDATION AT 2940 CORDER ST, HOUSTON, TX 77009.**
 PLEASE CALL ME REGARDING THE FULFILLMENT OF MY PLEDGE.
 I WOULD LIKE TO PAY BY CREDIT CARD. PLEDGE PAYMENTS MAY BE SCHEDULED ONLINE AT WWW.HALOHOUSEFOUNDATION.ORG.

CREDIT CARD INFORMATION

NAME ON CARD _____
 ADDRESS _____
 CARD NUMBER _____
 EXPIRATION DATE: _____ CVV NUMBER _____



*10 YEAR NAMING RIGHTS FOR ALL AREAS

SIGNATURE: _____

DATE: _____