COMMUNITY PARTNER | \$250 - \$500

As a Community Partner, your support helps provide up to:

- **3-6 family baskets** (feeding :12–24 people) OR
- the equivalent of 12–25 hot meals for seniors and veterans

Every contribution makes a direct impact in serving families in need across our community.

DONOR INFORMATION Name/Organization: Contact Person: Address: Email: Phone: **DONATION LEVEL** \Box \$250 \Box \$300 \Box \$400 \Box \$500 ☐ Other Amount: \$ DONATION METHOD ☐ Check (Payable to Maceo H. Jones Foundation) ☐ Online (visit mhifoundation.org ☐ Other: _____ RECOGNITION ☐ Please list my/our name as a Community Partner in event materials. ☐ I/we prefer to remain anonymous.

Name for Recognition (if applicable):

Thank you for partnering with us to continue Ms. Maceo H. Jones's 46-year legacy of giving and service .36 years led by Ms. Jones herself and 10 years carried forward by the Maceo H. Jones Foundation.