

**Widowed Persons Service
Rent Sponsor Commitment Form**

Individual/Company: _____

Address: _____

City, State, Zip: _____

Contact/Title: _____

Phone: _____

Contact Signature: _____ **Date:** _____

_____ **1 Month** \$550

_____ **2 Months** \$1,100

_____ **3 Months** \$1,650

_____ Other Donation \$ _____

Total Amount: \$ _____

Make checks payable to: **WIDOWED PERSONS SERVICE**
4211 CLYDE PARK SW – SUITE C, WYOMING, MI 49509

Or We Accept Visa/MC: **Number:** _____ **Expiration mo/yr:** ____/____

**Thank you for helping us kept the “doors open” in 2011! Your help as a Rent Sponsor assists us in meeting one of our most basic but most essential needs. We will be happy to recognize your donation in the next issue of our monthly newsletter, on our website and in our annual report.*