



Enclosed is my check in the amount of \$ _____ so that I can help NKCAC assure that low income families and individuals receive the support they need to become self-reliant, contributing members of our society. I would like my donation to be used for (check any that apply):

- Head Start Financial Literacy LINK Energy Assistance Nutrition Health
- Homeless Services Affordable Housing Home Repair Employment training
- Spelling Bee Children Senior Citizens Families Disabled Youth
- Other: _____

We appreciate your support of the work of Northern Kentucky Community Action Commission and would like to keep in touch. We hope you will help us get to know your interests better by completing the form below. NKCAC values your privacy and will never share or sell your private information.

First Name	_____	Last Name	_____
Address	_____	<input type="checkbox"/> Home Address <input type="checkbox"/> Work Address	_____
City	_____	State	_____ Zip _____
Phone	_____	Email	_____
Spouse	_____	Children	_____
Employer	_____	Position	_____

Thank You!

Mail your contribution to:

Northern Kentucky Community Action Commission
P.O. Box 931
Covington, KY 41012