



A stable home is fundamental to a person's physical and mental health and quality of life.

Order your gifts to help your neighbors working to overcome homelessness.

STEP 1 Select Your Gifts

<i>Gifts for</i> MY SISTERS' PLACE			
GIFT DESCRIPTION	COST	QTY	TOTAL
Newborn Care Bundle			
Kitchen Table and Chairs			
Bus Passes			
Youth Support			
Toys for Special Occasions			
Keys to an Affordable Apartment			
A Permanent Address			
Summer Camp			
Healthy Eating Education			
Art Kits for Children			
Starter Kitchen Set			
Groceries			
Where Most Needed	ANY AMOUNT \$ _____		
MY SISTERS' PLACE TOTAL:		\$ _____	

<i>Gifts for</i> MERCY SHELTER AND HOUSING			
GIFT DESCRIPTION	COST	QTY	TOTAL
Hot Meals and Community			
Blankets, Sheets, and Pillows			
Supplies for Health Screenings			
Hygiene Kits and Sleeping Bags			
Dental Care			
Legal Assistance			
Emergency Housing			
Employment Services			
Bath Sets			
Mental Health Services			
Clothing and Footwear for New Jobs			
Case Management			
Where Most Needed	ANY AMOUNT \$ _____		
MERCY SHELTER AND HOUSING TOTAL:		\$ _____	



It's sometimes difficult to predict all the possible ways homelessness can affect your neighbors. We will gratefully accept a gift of any amount designated to "Where Most Needed." It will go toward a specific urgent need facing an individual or family we serve.

We are deeply grateful for your generosity. Thank you.

STEP 2 Select Your Payment Method

Enclosed is my check (Payable to My Sisters' Place, Mercy Housing and Shelter or one check for each)

Credit Card: Visa MasterCard AmEx Discover

Credit Card Number: _____ Exp. Date _____ / _____ CCV _____

Your Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

STEP 3 (Optional) Tell Us Who You Will Honor with Your Gifts

We will send a personalized letter telling them of your special gift(s) to My Sisters' Place and/or to Mercy Housing in their honor.

Gift Description: _____

Full Name of Honorees: _____

Share their mailing address or their email address with us so we can notify them of your thoughtful gift.

Address: _____

City: _____ State: _____ Zip: _____

Email: _____



Mail this completed form with your payment in the envelope provided.



Prefer to place your order online? Visit ctcha.org/GiftCatalog



Questions? Contact us at **860.808.2044** or CLessard@mercyhousingct.org.

By selecting a gift through this catalog, you are making a donation to My Sisters' Place and/or Mercy Housing and Shelter. Gifts shown here illustrate goods and services used in our programs. In an effort to steward your gifts effectively, if we receive more contributions for a given item than we can use, we apply those funds to similar pressing needs.