My gift is being given in : ☐ Honor of ☐ Memory of

Honor/Memorial Name: _____

(Please list any additional names on a separate sheet)

Send Acknowledgement to: _____

(Name of person you wish informed of your gift)

Address: _____

City: _____ State: _____ Zip: _____

I want to give regularly to Meals on Wheels of Lee County:

I want to give $ _____ ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

Beginning ___/___/___ and ending ___/___/___ for a total of $ _____

Signature _____

☐ Charge my credit card automatically ☐ Charge my bank account automatically *(Please enclose a voided check.)*

Thank You! *All gifts are greatly appreciated and tax deductible to the fullest extent of the law.*

Meals on Wheels

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 2800 TUPELO, MS

POSTAGE WILL BE PAID BY ADDRESSEE

MISSISSIPPI METHODIST SENIOR SERVICES INC
PO BOX 1567
TUPELO MS 38802-9915

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

YOU can support MEALS ON WHEELS

- Donate to help end senior hunger in Lee County
- Volunteer to deliver meals
- Become an advocate

Can I really make a difference?

$5	$25	$100
FEEDS 1 PERSON PER DAY	FEEDS 1 PERSON PER WEEK	FEEDS 1 PERSON PER MONTH

$750	$1,500
FEEDS 1 PERSON 6 MONTHS	FEEDS 1 PERSON 1 YEAR

FOR MORE INFORMATION, CONTACT:

Ashley McDaniel

Executive Director of NextAge Mississippi and Meals on Wheels Coordinator

(662) 231-1614 or ashley.mcdaniel@mss.org

eden ALTERNATIVE · GOOD HOUSING OPPORTUNITY · THE GREEN HOUSE PROJECT PARTNER

MEALS ON WHEELS
OF LEE COUNTY
C/O Methodist Senior Services
P.O. Box 1567
Tupelo, MS 38802-1567

NONPROFIT ORGANIZATION
U.S. POSTAGE PAID
PERMIT #316
TUPELO, MS 38802

MEALS ON WHEELS

OF LEE COUNTY

A SERVICE OF

NEXTAGE MISSISSIPPI®

Services for Seniors at Home

Handyman & Housekeeping Services

A Ministry of Methodist Senior Services

Dear Friends,

Imagine if you were at home, alone and hungry, unable to cook for yourself. Consider the relief and security you would feel by having a hot, nutritional meal delivered by a smiling volunteer. Someone who also checks to make sure you are safe.

Five days a week, over a hundred senior adults in the Lee County area experience that pleasure thanks to donors like you who have supported the **MEALS ON WHEELS OF LEE COUNTY** *program.*

Every year, the demand for such services and the waiting list of elders in need grows. As little as $5.00 makes a big difference in the life of a senior in our area for a day. We ask that you consider making **MEALS ON WHEELS OF LEE COUNTY** *a part of your giving this year. We would truly be honored to partner with you in caring for these elders.*

Thank you for your consideration. Through your prayers, volunteerisim and resources, we can make a difference in the lives of these elders everyday!

Thank you
for supporting these elders!

Who is helped by MEALS ON WHEELS

The recipients of MEALS ON WHEELS are typically home-bound individuals 62 years and older who have no other dependable daily source for planning, cooking and serving their meals. Often the recipients suffer from debilitating illnesses which prevent them from actively caring for their daily needs.

Because many also have a very low income, there is no charge to them for the meals they receive. Therefore, the MEALS ON WHEELS program depends on donations from individuals, businesses, clubs, church groups and the United Way of Northeast Mississippi to continue the program.

Mississippi is listed in the TOP 10 STATES with the highest rate of hunger risk among seniors.

YOUR gift TODAY can…

- Help them EAT healthier
- Help improve their HEALTH
- Help them feel more SECURE
- Help them continue to live in their own HOME

Please Charge My:
- ❑ Visa
- ❑ MasterCard
- ❑ AMEX
- ❑ Discover

Card #: _____

Expiration: ____ / ____ /

CCV# : _____
(Security Code on the back of the card)

Signature: _____

You may also donate securely online at **www.msss.org**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Enclosed is my gift of: ❑ $750 1/2 YR ❑ $375 1/4 YR ❑ $100 Month ❑ $25 Week ❑ Other $ _____

❑ My check is enclosed ❑ Please Email Receipt ❑ Gift is Anonymous

❑ My Employer Will Match My Charitable Donation