**THE INTERFAITH COMMUNITY OF SCHENECTADY, INC.**

**ANNUAL CONTRIBUTION FORM**

Please complete this form, choose a contribution level, and mail it with your check to our treasurer:

**Edith Kliman, 2263 Sweetbrier Road, Schenectady, NY 12309**

The Interfaith Community of Schenectady, Inc. was established on November 17, 1971. It is the first organization in New York State to encourage participation of diverse religious institutions and organizations. It’s goal has been to foster dialogue and create better understanding between groups of different faiths.

**INTERFAITH OFFICERS FOR 2020**

**Miranda Rand, President ………………………………** **mirandarand411@gmail.com/518-393-5047**

**Colette Odell, Vice-President ………………………...................................................... 518-371-0634**

**Humera Khan, Secretary ………………………………….……………………** **humerak19@gmail.com**

**Edith Kliman, Treasurer ................................................................................................ 518-346-0025**

**IMMEDIATE PAST PRESIDENTS:** Rev. Bob Long & Sr. Carol Davis, OP

**COORDINATING COUNCIL:** Erica Berger, Karen Bond, Zarina Chaudry, Scott Eberling, Rev. Joselle Gagliano, Audrey Hughes, Humera Khan, Edith Kliman, Rev. Bob Long, Gerry Pierce, Miranda Rand

***PARTICIPATION IN THE INTERFAITH COMMUNITY OF SCHENECTADY, INC.***

 ***IS OPEN TO ALL RELIGIOUS INSTITUTIONS AND INDIVIDUALS OF ALL FAITHS***

**I (We) wish to contribute: (please mark the level at which you wish to make your contribution)**

* **LIFE: $600 payable in one payment of $600, or six annual installments of $100.00 each**
* **PATRON: $100 annually (individual *or* household)**
* **SUSTAINING: $60 annually (individual) $70 annually (household)**
* **CONTRIBUTING: $35 annually (individual) $45 annually (household)**
* **SUPPORTING: $25 annually (individual) $35 annually (household)**

**I AM *CURRENTLY EMPLOYED* BY GE and my check is eligible for the GE Foundation Matching Funds program. My check has been reported.\***

***\*****GE Foundation Matching Funds program will no longer match contributions to nonprofit organizations made by retired employees.*

**THANK YOU**

 Your contribution helps to offset our overhead which consists of telephone service, secretary’s salary and associated expenses, Chaplaincy program, and costs associated with presenting programs.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_ ZIP CODE: \_\_\_\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_