

LAFAYETTE FOUNDATION ON AGING, INC.



Marjorie 78 & Anna 80 Burtleigh receive meals from Sheila Broussard

ADOPT-A-SENIOR FOR

"MEALS ON WHEELS"

The Lafayette Foundation on Aging, Inc. being a 501c(3) Non-Profit Organization is the Funding Agency for Senior Specific programs.

The Lafayette Foundation on Aging, Inc. is working very hard to solicit funds to assist the Lafayette Council on Aging, Inc. "Meals on Wheels" program. By adopting a senior for meals, you have the satisfaction in knowing you are doing your part to help someone who really needs your help. This program has a waiting list of over 100 qualified seniors. Through all the Foundation Fund Raising efforts it is hoped that the waiting list can be decreased substantially by the end of this fiscal year.

The cost of a meal is \$3.32 (delivery cost is separate). There were 117,750 meals delivered this past year. The Lafayette Foundation on **Aging Adopt-a-Senior** program provides a large portion of the meals being served daily to at risk senior citizens in Lafayette Parish. For just \$60 a month or \$700 a year, you can help provide a daily meal to a senior citizen who is no longer able to cook for themselves. (\$30 a month or \$350 for six months, or \$175 for three months).

The **Adopt-a-Senior** program offers you the opportunity to make a **tax-deductible contribution** that impacts someone in our local community. When you choose to adopt a senior, you have the knowledge that you have made a large impact on someone's life. You may request the name of the individual you have adopted. As the senior population grows, the waiting list for meals also grows.

Giving is simple! Just fill out the form below, marking your donation and return it with your check or we can bill you monthly. We will send you a receipt for your taxes and the name of the person you are adopting, if you so choose.

Thank you for your consideration; we look forward to hearing from you.

(Cut along the dotted line and return with donation)

ENROLLMENT FORM

Name: _____

Address: _____

City, State, Zip: _____

Telephone #: () _____

- I have enclosed my check for \$700 to Adopt-a-Senior.
- Enclosed is my first monthly payment of \$60 to Adopt-a-Senior.
 - Please bill me 12 times for my \$60 payments beginning _____
- I have enclosed my check for \$350 to Adopt-a-Senior for six months.
 - Please bill me 12 times for my \$30 payments beginning _____
- I have enclosed my check for \$175 to Adopt-a-Senior for three months.
 - Enclosed is my donation of \$ _____
 - Please send me a receipt.
 - Please send me the recipient's name.

Please send this form to:

LAFAYETTE FOUNDATION ON AGING, INC.
160 Industrial Parkway
Lafayette, La. 70508

Contact person: **Larry Baker**
(337) 262-5990



Ms. Christine Zeno 95