



## RAGFL CHARITABLE FOUNDATION FUNDRAISING PROJECT 2014

The RAGFL Charitable Foundation is fundraising to replace the children's playgrounds at the Broward Partnership for the Homeless in Fort Lauderdale, Florida. Your support of this mission is requested. Children need a safe place to play while their parent(s) are seeking employment and learning new trades. Homelessness is not the business of children.

The Charitable Foundation will be hosting a fundraising event on Thursday, November 13<sup>th</sup> at Dapur Asian Tapas and Lounge that will include auctions, a DJ and good food and cocktails. Your assistance is requested by donating an item for the auction. Any donation is greatly appreciated – gift cards, tickets, baskets, jewelry, dinners, services, electronic items, etc.

Send donations to: RAGFL Charitable Foundation, 1765 NE 26<sup>th</sup> St., Fort Lauderdale, Florida or give to one of the Charitable Foundation Trustees. Please visit our website at [www.realtorcharitablefoundation.com](http://www.realtorcharitablefoundation.com). The Charitable Foundation is a 501(c) (3) tax exempt organization.





## BROWARD PARTNERSHIP FOR THE HOMELESS (BPHI) CHILDREN'S PLAYGROUND

\_\_\_\_\_  
Print Your First Name

\_\_\_\_\_  
Print Your Last Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Apt/Suite #

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Day Phone Number or Cell

\_\_\_\_\_  
Email Address

\_\_\_ \$1 to \$249 Friend to BPHI and The Charitable Foundation

\_\_\_ \$250 Infant level      \_\_\_ \$2,500 Caregiver level

\_\_\_ \$500 Toddler level      \_\_\_ \$5,000 Hero level

\_\_\_ \$750 Child level      \_\_\_ \$1500 Backless Bench includes recognition plaque

\_\_\_ \$1000 Family level      \_\_\_ \$2,500 Bench with Back includes recognition plaque

\_\_\_ \$ \_\_\_ Donation for specific piece of playground equipment

- Make Check payable to RAGFL Charitable Foundation
- Mail check and this form to Charitable Foundation, 1765 NE 26<sup>th</sup> St., Fort Lauderdale, FL 33305

\_\_\_ Charge my \$ \_\_\_ donation to: AMEX \_\_\_ VISA \_\_\_ MasterCard \_\_\_ Discover \_\_\_

Name as shown on Credit Card: \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing Address for the card: \_\_\_\_\_

Street Address

\_\_\_\_\_  
City and State

\_\_\_\_\_  
Zip Code

Signature as it appears on credit card: \_\_\_\_\_

(You may fax this form with your credit card information to: 954-567-5002 – Confidential FAX at GFLR – ATTN: Kathie McEvoy)