

# Recovery Café LONGMONT

## It's Time to Grow!

In five years, we have expanded our reach in the community and grown beyond our wildest dreams.

Our goal is to raise **\$5 million** to create a space that will significantly enhance our services for our members, the Longmont community, and beyond.

**Join us in making this vision a reality!**

**Your support will help us create a  
brighter future for Recovery Café  
Longmont and the entire community.**



*Project  
Goals*

### **Beautiful and Inviting Space**

Our new home will be welcoming and warm, creating a positive and inspiring environment for all who enter.

### **Job Training and Skill Development**

We will provide job training and practical skills development for those in recovery, helping them establish a foundation of stability in their journey.

### **Increased Accessibility**

The building will be accessible to everyone, ensuring that all community members can benefit from our services.

### **Sober Event Space**

Recovery Café Longmont will serve as a sober event space, offering a safe and supportive environment for community gatherings and celebrations.

# Donate or Pledge to Our Capital Campaign



☐ Donation \$ \_\_\_\_\_

☐ Pledge\* \$ \_\_\_\_\_

\*To be paid

☐ Monthly

☐ Quarterly

☐ Yearly

\*Over number of years (check one)

☐ One

☐ Two

☐ Three

☐ Four

☐ Please keep my donation anonymous

## Ways to Donate

I will make the donation by (check one):

☐ Check ☐ IRA ☐ Donor-Advised Fund ☐ Gift of Stock

☐ Other: \_\_\_\_\_

Donation by Credit Card ☐ Visa ☐ Mastercard ☐ American Express

Name on Credit Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration: \_\_\_\_\_ CVV: \_\_\_\_\_

*I authorize Recovery Café Longmont to charge donations of \$\_\_\_\_\_ on my credit card listed above until my pledge is fulfilled starting with the date this is received.*

## Planned Giving

☐ Yes, I have included Recovery Café Longmont in my will/other estate plans.

☐ Yes, please send me more information about the benefits of planned giving with Recovery Café Longmont.

## Contact Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Preferred Phone Number: \_\_\_\_\_

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

*Recovery Café Longmont is a Colorado 501(c)3 organization with the Federal Tax Identification Number 83-2060567,*

Interested in learning more?  
Please contact Virginia Choung  
virginia@recoverycafelongmont.org or 720-815-2885