



710 N. Lincoln Street
Wilmington, DE 19805-3016

133 Years of promoting self-sufficiency

Board Officers

- Clint Walker
President
- John Matarese
Vice President
- Carol J. Anderson
Secretary
- Michael A. Albero, CPA, MST
Treasurer

Board Members

- Jeffrey G. Argus
- Nino DiRienzo
- Linda Friedman, Ph.D
- Kiadii S. Harmon, Esq.
- David Holden
- Evan W. Krick, Esq.
- Penny F. Marshall, Esq.
- Gene McGroary
- Mary Ann Miller
- Heddi Mitchell
- Patricia L. Quann
- Susan Simmons
- Damali Thomas
- Sherri D. Tull-Hubbard
- Kerry Welsh
- Joe Westcott

Honorary Board Members

- The Hon. Thomas L. Ambro, Esq.
- Ryan A. Barry
- William Beck
- William Di Nardo, Jr.
- Linda D. Farquhar
- Doug Gramiak
- Robert V. A. Harra, Jr.
- Theresa A. Hasson
- Edmond M. Ianni, Esq.
- John P. McMenamin
- Carolyn M. McNeice, Esq.
- James Paoli
- Philip S. Reese
- R. Craig Stabler
- Laura T. Stark
- Susan P. Terranova
- Greta D. White
- Kathleen D. Wilhere
- Leonard J. Young, Jr.

Executive Director

- Paul F. Calistro, Jr.

In Fond Memory

- Paul Andrisani
- Azalia Briggs
- Michael B. Clark
- Paul E. DiSabatino
- Jean M. Lewis
- Carl S. Mazzairelli, Sr.
- Judith A. Smith
- Vincent L. Strano

West End Neighborhood House
C/o Executive Director, Chief Financial Officer, & Director of Development
710 N. Lincoln St.
Wilmington, DE 19805

ATTENTION: Executive Director, Chief Financial Officer, & Director of Development

The purpose of this letter is to provide confirmation of my request to make a direct contribution from my Traditional or Roth Individual Retirement Account to West End Neighborhood House, per the instructions below:

Name of IRA Plan Administrator/Trustee:

Account #:

Amount to be Distributed:

The proceeds of this donation are unrestricted and may be used for the general purposes of the organization; **OR** are to be used for the following purposes only:

I intend for this transfer to qualify as a charitable distribution for tax year _____.
Please feel free to contact me for clarification or with any questions.

Donor Signature:

Donor Name (printed):

Mailing Address:

Email Address:

Phone Number: