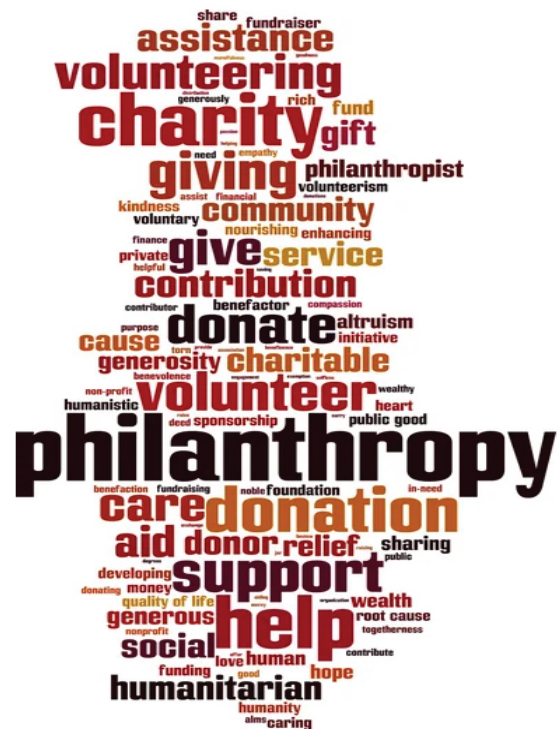


2022 Development Committee Annual Report

Thank you for your generosity!

Beginning Balance	5,351.58
Revenue	
Donations	5,006.55
Expenses	
Lobbying Dues	2,658.00
Donations	1,815.00
Total	<u>4,473.00</u>
Ending Balance	<u>5,885.13</u>



Tri-Valley is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability or veteran status.



Tri-Valley
Opportunity Council, Inc.

Tri-Valley's Development Fund

Our Goal is to positively impact the community with funds available.

Where does my contribution go?

- Many grants require a match, and having funds available from the Development Committee would provide new opportunities!
- With your contributions, Tri-Valley could borrow from itself for projects, facilities, etc. if there was a need.
- Your contributions could be used to meet short-term obligations and provide temporary cash-flow.
- Your contributions would provide funds as government funding requirements change.
- Your contributions would provide added resources to partnerships.
- Your contributions would provide added resources for Tri-Valley staff in crisis.

Recently, the Development Committee has...

- Community Action Partnership (National Office) for Tornado relief in Kentucky and Tennessee.
- Sent donations to Tri-Valley staff that had experienced an emergency/hardship in 2022.
- Sent a donation to the Crookston Early Childhood Initiative.
- Continued lobbying efforts crucial to serving those in our communities that need our help. Donations were given to the Minnesota Community Action Partnership (MinnCAP).

Will you support our mission?

- Select an option below.

Option I

Withholding Amount

Effective on the next available pay period.

- ☐ I wish to allow Tri-Valley to withhold an amount equal to _____ hour of my wages per month. Note: withholding must be a minimum of ½ hour of wage per month.

Option II

Payroll Deduction Options

Effective on the next available pay period.

Per Pay Period, please withhold (check the applicable box):

- ☐ \$1 per pay period.
☐ \$3 per pay period.
☐ \$5 per pay period.
☐ \$ _____ (other) per pay period.

Option III

Cash/Check Option

Cash/Check Option (check the applicable box):

- ☐ I have enclosed my contribution of \$ _____.
☐ Check here to remain anonymous.

Option IV

Credit Card Option

Contact Mitch Bakken at mitch.bakken@tvoc.org

Your Name: _____ Your Employee ID: _____ Date: _____

Signature: _____

Thank you for your support! You are making a difference in people's lives!