

MARQUETTE WOMEN'S CENTER
1310 S. Front Street, Marquette, MI 49855 – 906-225-1346 – www.wcmqt.org
Serving Marquette and Alger Counties since 1973

The Marquette Women's Center is a community based service organization providing 24/7 access to emergency intervention services and crisis intervention. Individual & support group counseling and advocacy services are provided to survivors of domestic and sexual violence, dating violence and stalking through programs that Protect, Educate, Advocate, Counsel and Empower. (PEACE)

For 45 years, it has been our mission to support survivors, to educate and encourage sensitive public awareness and to work relentlessly to change the attitudes that allow these violent crimes to continue.



The Harbor House is a safe haven shelter for survivors of domestic and sexual violence, also providing outreach services to survivors not residing in the shelter. It is the only shelter in Marquette and Alger Counties and usually operates at maximum capacity. There is no charge for shelter or support services. All services are paid for through fundraising, grants and donations from our community.

A tax-deductible donation to The Women's Center/Harbor House can be directed to a host of causes. You may choose to support a woman or family for one day/week, pay for one month of expenses, or donate to our General Fund which will be used to meet the most critical needs of our organization at the time of your donation.

General Fund Donation:	\$_____
Sasawin	\$_____
Harbor House Shelter Expenses:	
Support a woman overnight:	\$25 \$_____
Support a woman for 1 week:	\$175 \$_____
Support a family overnight:	\$37 \$_____
Support a family for 1 week:	\$250 \$_____
Monthly Utility Costs	\$1,650 \$_____
Monthly Food Cost	\$2624 \$_____
Women's Center Expenses:	
Monthly Operation Cost	\$2,924 \$_____
Monthly Utility Costs	\$951 \$_____
Mortgage Payment:	\$3,226 \$_____
Other Donation:	\$_____
TOTAL DONATION:	\$_____

NAME: _____

ORGANIZATION: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

PHONE: _____ EMAIL: _____

DONATION IN HONOR OF: _____

DONATION IN MEMORY OF: _____

NOTIFICATION OF DONATION TO BE SENT TO: _____

ADDRESS: CITY, STATE, ZIP: _____