

## Faces Behind the Funding

At THDA, we are proud of our partners and the work we accomplish together to provide safe, sound, affordable housing opportunities to Tennesseans. **Thank you for being a valuable partner in our work.**

THDA's Communications division would love to tell of the accomplishments we have made together, but WE NEED YOUR HELP! You are the feet on the ground. You are the ones who know the names and contact information of the Tennesseans who have received THDA assistance.

Because these residents know you, they might be more comfortable with you than they are with a government official calling them. We need your help with two things:

1. Provide us with the name and contact information for yourself and the individual/family who has participated in one of THDA's programs. This information can be delivered by email, phone, mail, spreadsheet, etc. Below you will find listed the information we need for each submission.
2. Help THDA's Communications staff schedule an interview with the individual/family.

For questions or to submit Faces behind the Funding information, please contact:

THDA Communications

Andrew Jackson Building, 502 Deaderick St., 3<sup>rd</sup> Floor, Nashville, TN 37243

[news@thda.org](mailto:news@thda.org)

### **PARTNER (Organization) INFORMATION:**

Contact Name: \_\_\_\_\_ Contact Organization: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

### **RESIDENT (Recipient) INFORMATION:**

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

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

ZIP: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Resident benefited from which THDA program: \_\_\_\_\_

*(continued)*

***Photo Release:***

I grant to THDA, its representatives and employees, the right to take photographs of me and my property in connection with the THDA program that assisted me. I authorize THDA to use and publish photographs of me with or without my name, in print and/or electronically for such purposes as publicity, illustration, advertising and Web content. I have read and understand the photo release:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_

**Please tell us below how this program positively impacted your life/family/work/community etc.**