

# Gift Form

DONOR INFORMATION	NAME (PLEASE PRINT YOUR NAME AS YOU WOULD LIKE IT RECOGNIZED IN OUR PRINTED MATERIALS IF NOT ANONYMOUS)	
	ADDRESS (CITY/STATE/ZIP)	
	HOME PHONE	HOME EMAIL ADDRESS
	CELL PHONE	WORK EMAIL ADDRESS
GIFT	I WILL DONATE THE AMOUNT OF \$ _____	
	<input type="checkbox"/> <b>CHECK ENCLOSED</b> (MADE PAYABLE TO MARQUETTE GENERAL FOUNDATION)	
PAYMENT INFORMATION	<input type="checkbox"/> <b>PLEASE CHARGE MY CREDIT CARD</b>	
	<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER	_____ CREDIT CARD NUMBER _____ _____ EXP. DATE _____ SECURITY CODE _____ _____ SIGNATURE AUTHORIZING CHARGE _____ DATE _____
	<input type="checkbox"/> <b>MY GIFT IS A PLEDGE</b> (PAYABLE OVER A TERM OF MONTHS/YEARS)	
	<input type="checkbox"/> PLEASE CONTACT ME AT THE PHONE NUMBER LISTED ABOVE TO MAKE PAYMENT ARRANGEMENTS	
SPECIAL INSTRUCTIONS	<b>GIFT DESIGNATION</b> <input type="checkbox"/> SUPERIOR FUND <input type="checkbox"/> RUN FOR LIFE <input type="checkbox"/> BREAST HEALTH FUND	
	<b>HONORARIUMS/MEMORIALS</b> <input type="checkbox"/> IN HONOR OF _____ <input type="checkbox"/> IN MEMORY OF _____ <input type="checkbox"/> NEITHER	IF YOU WISH TO NOTIFY SOMEONE OF AN HONORARIUM/MEMORIAL GIFT, PLEASE INDICATE THE NAME AND ADDRESS BELOW. NAME _____ ADDRESS _____ CITY/ST/ZIP _____ <small>THE AMOUNT OF YOUR GIFT WILL NOT BE REVEALED.</small>
	<b>ANONYMITY</b> <input type="checkbox"/> I WOULD LIKE MY GIFT TO REMAIN ANONYMOUS	<b>ADDITIONAL INFORMATION</b> <input type="checkbox"/> I WOULD LIKE THE FOUNDATION TO CALL ME REGARDING ESTATE PLANNING, WILLS AND TRUSTS
SIGNATURE	SIGNATURE _____ DATE _____	
	I WOULD PREFER TO RECEIVE FOUNDATION WRITTEN MATERIALS BY: <input type="checkbox"/> MAIL OR <input type="checkbox"/> EMAIL <b>FORWARD TO SUPERIOR HEALTH FOUNDATION BY MAIL (121 N. FRONT ST., MARQUETTE, MI 49855) OR BY FAX 225-6916. FOR MORE INFORMATION OR QUESTIONS, CALL 225-6914.</b> <small>GIFTS TO SUPERIOR HEALTH FOUNDATION ARE TAX DEDUCTIBLE TO THE EXTENT PERMITTED BY LAW</small>	