

General Donation

Thank you for printing.

A receipt will be mailed to your address.

| | |
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| Enclosed is my: <input type="checkbox"/> gift <input type="checkbox"/> pledge payment | I prefer to pay by: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> American Express <input type="checkbox"/> Discover Credit Card #: _____ Expiration Date: / / Cardholder's Name: _____ Amount: \$ _____ |
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Donor Information

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| My Name: | <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. & Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. _____ |
| My Address: | <input type="checkbox"/> Home <input type="checkbox"/> Business _____ City: _____ State: _____ Zip: _____ Home Phone: () - _____ Home Email: _____ Business Phone: () - _____ Business Email: _____ |
| My Job: | Company Name: _____ Address: _____ Job Title: _____ |
| <input type="checkbox"/> This gift is being made on behalf of my Company/Organization: Company/Org. Name: _____ Contact Name & Address (if Different than above): _____ | |

Tribute Information

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| This gift is: <input type="checkbox"/> In Memory Of: _____ <input type="checkbox"/> In Honor Of: _____ <input type="checkbox"/> Birthday <input type="checkbox"/> Anniversary <input type="checkbox"/> Graduation <input type="checkbox"/> Marriage <input type="checkbox"/> Recovery <input type="checkbox"/> New Arrival <input type="checkbox"/> Holiday <input type="checkbox"/> Other: _____ | Please Notify: Name: _____ Address: _____ City: _____ State: _____ Zip: _____ |
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Gift Information

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| Please use my gift for: <input type="checkbox"/> Pediatric Research <input type="checkbox"/> Endowment <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Area of Greatest Need <input type="checkbox"/> Building Fund <input type="checkbox"/> Equipment Needs <input type="checkbox"/> Those children whose families cannot afford the cost of care |
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| <input type="checkbox"/> I have already included Children's Mercy Hospital in my estate plans (will, trust, etc.) | <input type="checkbox"/> Please contact me about gift plans which would pay me income and save taxes |
|---|--|

Dear Children's Mercy Hospital:

(make a comment, ask a question, or tell your Children's Mercy story)