



FLINT FOUNDATION

Please complete this form and send it along with your contribution to:

McLaren Flint Foundation · 401 S. Ballenger Hwy. · Flint, MI 48532 · Office 810.342.4087 · Fax 810.342.2428

Please designate my gift for:

- Where needed most
Art Therapy
Behavioral Health
Ever Living Tree (Cancer Pt Care)
Free Mammograms Fund
Hospitality House
Karmanos Cancer Institute at McLaren Flint
McLaren Auxiliary
Nights of Hope (Hospitality House)
Nursing Services
Patient Care Fund
Pulmonary Rehabilitation
Reel Recovery
Shori/Pervin Majjhoo Neuroscience
Wheels to Wellness
Other:

Philanthropist information:

Name of contributor(s):

Address: City/State/Zip:

Telephone: E-mail:

Enclosed is my gift of:

- \$25 \$50 \$100 \$250 \$500 \$1,000 Other:

Method of payment:

- Check made payable to McLaren Flint Foundation (enclosed)
Credit card
Charge my contribution to:
Visa Mastercard Discover AMEX
Name as it appears on card:
Account number: Exp. Date: CSC:
Cardholder Signature:

Tributes:

This gift is: in honor of in memory of

Name

Occasion

Please send notification of this gift (amount is not indicated) to:

Name:

Address: City/State/Zip:

- Please check if you would like your gift to remain anonymous.
Please check if you would like to receive information of Planned Giving or bequests.
Please add me to your special events and programs mailing list.
Please send me a McLaren Health Care (including all affiliated) Annual Report.

Thank you for your support of our efforts to improve patient care in our community.

Your contribution is tax-deductible to the extent allowed by law, as McLaren is a non-profit health care organization. A tax-deductible receipt will be mailed to you. McLaren Flint & McLaren Flint Foundation does not sell donor lists. All contributions are confidential.