

Financial Donation Form

Make a difference through a tax-deductible gift today. 100% of any monies received by The Foundation of Mon General will be used to fund the program or department of your choice. The Foundation does not retain any funds for overhead or fees.

Please print this form and mail it to:

The Foundation of Mon General Hospital
1200 JD Anderson Drive
Morgantown, WV 26505

Please mail my donation receipt to:



Name: _____
Address: _____
Phone: _____
Email: _____

I have enclosed a check in the amount of \$ _____

OR

Please charge my credit card in the amount of \$ _____

Visa MasterCard AMEX Discover

Credit Card Number: _____

Expiration Date: _____

Card Verification #: _____

Name: _____

Address: _____

City/State/Zip/Country: _____

Recognition:

- Include my name, without amount, in your list of donors.
- I wish to remain anonymous.

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Designation:

Please use my gift to support the following:

- 2011 Capital Campaign – The Commitment Continues
Orthopedic Center, Endoscopy Center, Birthing Center, Catheterization Lab
- Emergency Room
- Planned Giving
- Zelda Stein Weiss Cancer Awareness and Early Detection Program
- Where it's needed most
- Other: _____

Please specify department of your choice.

Memorial/Tribute:

Is this gift in memory of or in honor of someone? If so, please let us know for whom it is in tribute and to whom an acknowledgement should be sent. (Please note we do not note the gift amount in the acknowledgement.)

In Memory of _____

OR

In Honor of _____

Acknowledgement should be sent to:

Name: _____

Address: _____

City/State/Zip/Country: _____

Phone: _____

Donation From: _____

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Additional Comments:

Thank you for your generous contribution to The Mon General Hospital Foundation.

If you have any questions, please call us at 304-598-1208.