

You may use this form when making a memorial gift/donation using your credit card. Fax this completed form to (315) 252-9080 or mail to Hospice of the Finger Lakes, 1130 Corporate Drive, Auburn, New York 13021. Memorial gift donations may also be taken over the telephone by calling (315) 255-2733.

MEMORIAL GIFT/DONATION USING A CREDIT CARD

GIFT IN MEMORY OF: _____

DONOR NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ POSTAL CODE: _____

TELEPHONE NUMBER: _____

ACKNOWLEDGEMENT TO:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ POSTAL CODE: _____

VISA/MASTER CARD # _____

AMOUNT OF GIFT: _____ EXPIRATION DATE: _____

THREE DIGIT CARD VERIFICATION VALUE _____

The digit credit card verification value is the final three numbers printed within the signature panel on the back of the card.

NAME / ADDRESS ON CARD IF DIFFERENT FROM DONOR NAME:

SIGNATURE: _____

DATE: _____