



PUGET SOUND AFFILIATE
PRINTABLE DONATION FORM

Please accept my contribution of \$_____ to the Puget Sound Affiliate of Susan G. Komen for the Cure to save lives and end breast cancer forever by empowering people, ensuring quality of care for all and energizing science to find the cures.

Name: _____ Phone: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

GENERAL DONATION

I have enclosed a check.
Please make checks payable to Susan G. Komen for the Cure

Please charge my VISA /MasterCard.

Card Number: _____ Exp Date: _____

Signature: _____

I would like to make a gift of securities (please contact our office).

HONOR/ MEMORIAL GIFTS

Please complete one of the following:

In Honor of: _____

In Memory of: _____

PLEASE SEND THE ACKNOWLEDGEMENT OF THIS GIFT TO:

Komen will send a personalized tribute recognition card to the person(s) listed above and below.

Name: _____

Address: _____

REMEMBER KOMEN PUGET SOUND IN YOUR YEAR-END GIFT PLANS

As you plan your end-of-year charitable donations, please consider the Puget Sound Affiliate of Susan G. Komen for the Cure on your gift list. Komen Puget Sound relies on the support of individuals, corporations, and foundations to help fund superior grants to local non- profit organizations providing breast cancer education, screening, and treatment options for medically underserved residents in Western Washington, as well as to fund national research in the quest for cures.

INCREASE YOUR DONATION WITH CORPORATE MATCHING FUNDS

Many employers will match your personal donation. Check with your company for more information on matching gift programs. Simply obtain a form from your employer, complete your portion of the for and mail it to our office as listed below.

PLEASE MAIL THIS FORM AND YOUR DONATION TO:

Susan G. Komen for the Cure
Puget Sound Affiliate
112 Fifth Ave N
Seattle, WA 98109

(206) 633-0303 ext.108
gail@pskomen.org
www.komenpugetsound.org