



Send completed form with payment to:

ATTN: Sandy Siegel
Family Health Care
1615 Michigan Avenue
Baldwin, MI 49304

YES!! I believe in and support FHC's mission of providing quality, integrated and comprehensive health care services that are accessible to all. A minimum of \$50 enrolls you in the Family Health Care "Jubilee Society."

Enclosed is my tax-deductible gift

\$50 \$100 Other

Please complete by designating how you wish to donate:

Check Enclosed (make payable to Family Health Care)

Credit Card

AM/EX MC VISA Discover

Card #: _____ \$ _____ Total Gift Amount

Exp. Date: _____

CSV: _____

Name on Card: _____

(Please print)

Signature: _____ Date: _____

(Required for payroll and credit card authorization)

*** Name as you would like it to appear on a donor plaque. A minimum donation of \$50 required.

Address

City State Zip

Email Phone