

## LifeWorks Comfort Care Gift/Pledge Card

- \$1,000 & up ~ Logan Brothers Fellowship**
- \$500 - \$999 ~ Carl W. & Evelyn Kaser Society**
- \$250 - \$499 ~ MCMC Partner**
- \$100 - \$249 ~ MCMC Associate**
- \$1 - \$99 ~ Circle of Friends**

**I/We support the Mid-Columbia Health Foundation LifeWorks Comfort Care Program with a gift/pledge of the following amount:**

- Personal Gift/Pledge Amount** . . . . . \$ \_\_\_\_\_
- Organization Gift/Pledge Amount** . . . . . \$ \_\_\_\_\_

**Amount enclosed/pledged for 2007** . . . . . \$ \_\_\_\_\_

**Amount pledged for 2008** . . . . . \$ \_\_\_\_\_

Name/Title: \_\_\_\_\_

Organization: \_\_\_\_\_  Matches Gifts? Y / N

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone number: \_\_\_\_\_

- Check                       MasterCard                       VISA

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Please designate my gift/pledge:

In honor of \_\_\_\_\_

In memory of \_\_\_\_\_

Notification Address \_\_\_\_\_

\_\_\_\_\_

- Please call me to discuss my donation

**Pledges are billed quarterly unless requested otherwise.** Please make checks payable to the Mid-Columbia Health Foundation. Giving club recognition is based on the combined amount of your personal and organizational gifts. Pledges should be paid in full no later than December 31. **THANK YOU VERY MUCH FOR YOUR SUPPORT.**