



Thank you for your interest in making a gift to Carondelet Foundation. In a hurry? Please call (520) 873-5000 with MasterCard, Visa or American Express. Or, print this form and mail to:

CARONDELET FOUNDATION
 120 N. TUCSON BLVD.
 TUCSON, AZ 85716-4740

DONOR INFORMATION

Name: _____
 Address: _____
 City/State/Zip: _____
 Day Telephone (_____) _____

GIFT AMOUNT

Enclosed is my tax-deductible gift of \$ _____

- My gift is unrestricted to support an area where needed most.
- I would like my gift to be restricted to the following area

Please list my/our name in Carondelet Foundation's donor recognition materials as:

(e.g.) Mr. & Mrs. John Smith or John & Mary Smith

METHOD OF PAYMENT

- Check made payable to Carondelet Foundation
 - Credit card Visa Master Card American Express *(No debit cards please.)*
- Card Number _____ Expires _____
 Name on card _____

THIS IS A TRIBUTE GIFT:

In memory of: _____

Relationship: _____

In honor of: _____

Relationship: _____

For this special occasion: _____

(e.g.) birthday, anniversary, birth, graduation

Please send notification of this gift. *(The amount of your gift will not be disclosed.)*

Name: _____

Address: _____

City/State/Zip: _____



Member of Carondelet Health Network
 Affiliate of Ascension Health