

When you give a Tribute Donation, make your gift  
*In Honor of* or *In Memory of* a loved one, friend or colleague.  
Your Tribute Donation will be recognized in our Virtual Program and on our website.

- Q with a donation of \$1,000
- U with a donation of \$750
- A with a donation of \$500
- L with a donation of \$250
- I with a donation of \$100
- T with a donation of \$50
- Y with a donation of your preference \$ \_\_\_\_\_

To participate, please complete the form on back side  
and return in the enclosed envelope.

All donations are tax deductible.

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Thank you!

- My check is enclosed, made payable to Mary Health of the Sick.
- Please charge my credit card:  VISA  MasterCard  Amex

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ CVC#: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone#: (\_\_\_\_) \_\_\_\_\_

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Give your individual, family or corporate name for Tribute listing: \_\_\_\_\_

\_\_\_\_\_ or \_\_\_\_\_  
In Honor of In Memory of



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