



P.O. Box 4587
Missoula, Montana 59806
406-329-5640

Supporting the health of our region

Yes! I would like to give to the Providence Montana Health Foundation

Enclosed is my tax-deductable gift of:

\$500.00 \$250.00 \$100.00 \$50.00 Other: _____

Please allocate this donation to:

- | | |
|---------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> St. Patrick Hospital's Greatest Need | <input type="checkbox"/> International Heart Institute |
| <input type="checkbox"/> Team Up Montana Cancer | <input type="checkbox"/> Emergency Department |
| <input type="checkbox"/> Neurosciences | <input type="checkbox"/> St. Patrick House |
| <input type="checkbox"/> Other: _____ | |

Payment options:

- Check enclosed (Please make checks payable to Providence Montana Health Foundation)
 Charge my credit card Visa MC American Express Discover

Card Number: _____

Exp. Date: _____ CVV2 Code: _____ Name on card: _____

Signature: _____

Email: _____

I would like to make this gift in honor/memory of: _____

Please send acknowledgement to:

Name _____

Address _____

To learn about other programs, services and ways to give, please contact the Providence Montana Health Foundation at 406-329-5640 or visit give.providence.org/montana