

Gift Form

Your tax-deductible gift to Illinois Neuroscience Institute Foundation Council provide our patients with the finest care possible. All gifts support the work of the Sisters to provide high-quality healthcare for generations to come. *Please print this form and mail to INI Foundation, 530 NE Glen Oak Avenue, Peoria IL 61637 or fax to (309) 566-5688.*

Name: _____

Address: _____

Phone: _____ Email: _____

ENCLOSED IS MY GIFT OF \$ _____.

Please charge this gift to my Visa MasterCard Discover American Express

Print names as it appears on card: _____

Card Number: _____ Expiration Date: _____

Signature: _____

Please make checks payable to Illinois Neurological Institute Foundation (located at OSF SFMC Foundation)

PLEASE USE MY GIFT FOR:

- | | |
|---|--|
| <input type="checkbox"/> Illinois Neurological Institute General Fund | <input type="checkbox"/> Sleep Center Fund |
| <input type="checkbox"/> ThinkFirst Program (Brain Trauma) | <input type="checkbox"/> Multiple Sclerosis Center Fund |
| <input type="checkbox"/> Stroke Center Fund | <input type="checkbox"/> Epilepsy Center Fund |
| <input type="checkbox"/> Spine Institute Fund | <input type="checkbox"/> Neuroscience Nurses (CNRN Fund) |

THIS IS A TRIBUTE DONATION MADE IN HONOR OR MEMORY OF SOMEONE SPECIAL. (CIRCLE ONE)

Honoree: _____

Occasion (e.g. birthday, anniversary, recovery, memorial): _____

Relationship to honoree (e.g. parent, friend, neighbor): _____

Please notify: Name: _____

Address: _____

A special card will be sent to the person/family you designate. The amount of your gift will remain confidential.

MATCHING GIFT

If your employer matches employee donations, please list your employer's company name here.

- _____
- I would be pleased to have my name published in your newsletter as a donor. (Please enter your name(s) as you would like to be recognized in donor publications: _____)
- Please do not publish my name. I prefer to remain anonymous.
- I would like to know more about the benefits of including Illinois Neurological Institute Foundation in my estate plans. Please contact me by (circle one): phone email mail
- I have already included Illinois Neurological Institute Foundation in my estate plans.