

## \*\*\* PLEASE WRITE LEGIBLY \*\*\*

Who can we thank for this gift to charity?			
Last Name:	First Name:		
Date of Birth (mm/dd/yyyy):			
Street Address:			
City:	State:		ZIP Code:
Cell Phone:	one: Home Phon		:
E-Mail:			
Gift Information			
All donations must be made in the form of a check or money order.			
<ul> <li>✓ Enclosed is my gift of \$</li> <li>Please make check or money order payable to Changin' Hearts Foundation, Inc.</li> </ul>			
Please make check of money order payable to Changin Hearts Foundation, Inc.			
Print, fill out, and mail this form and check or money order to:			
Changin' Hearts Foundation, Inc.			
P. O. Box 841			
Palmetto, Georgia 30268-0841			
*For any questions, please email us at <a href="mailto:admin@changinhearts.org">admin@changinhearts.org</a> .*			
Are you donating this gift in honor of someone special?			
If you would like to make your gift in honor of someone special or a loved one,			
fill out the information below. This section is optional. <u>WE WILL SEND A CARD TO</u> <u>YOUR GIFT RECIPIENT.</u>			
Last Name:	First Name		:
Street Address:			
City:	State:		ZIP Code:
Message:			
Signature			
Signature of Applicant:			Date: