



Russell Regional Hospital Contribution Form

YES! I want to help advance the cause of a healthier community!

Print this form and mail it with your gift to Russell Regional Hospital at the address shown below

Name _____

Address _____

City/State/Zip _____

Phone _____ E-Mail _____

I would like to make a tax-deductible gift of:

\$500 \$250 \$100 \$50 \$ _____

Enclosed is my check payable to Russell Regional Hospital

Please charge my _____ VISA _____ MasterCard _____ AmEx _____ Discover

Card # _____ Exp. Date _____

Signature _____

I would like to make a gift of stock. Please call me at the number above.

My company's matching gift is enclosed.

I prefer to remain anonymous.

This gift is: in memory of in honor of

Please notify: _____

Your support of the Russell Regional Hospital is gratefully appreciated!

200 South Main St • Russell, Kansas 67665 • Tel: (785)483-3131 • Fax: (785)483-3125