

*18 Life-Saving Minutes with First Care*

*\* All gifts doubled up to \$100,000! \**

**My Best Gift Tonight:**

- \$10,000
- \$5,000
- \$3,000
- \$1,500
- Other \$ \_\_\_\_\_

**My Payment Method:**

- Check Enclosed
- Credit Card  
(complete information below)
- Within \_\_\_\_\_ days

**My Contact Information** (please print):

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**My Credit Card Information:**

- MasterCard
- Visa
- Discover
- American Express

Credit Card Number: \_\_\_\_\_

CVV: \_\_\_\_\_ Expiration: \_\_\_\_\_ / \_\_\_\_\_ Amount to be charged: \$ \_\_\_\_\_

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

Signature: \_\_\_\_\_

**Please complete and mail this form along with your donation to:**

**First Care Women's Clinic, PO Box 15198, West Palm Beach, FL 33416**

*Thank You!*

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