



Heart to Heart Hospice

Foundation Donation Form

Thank you for your donation to the Heart to Heart Hospice Foundation  
Your gift will change a life!

Mail this form along with your donation to:  
Heart to Heart Hospice Foundation  
7240 Chase Oaks Blvd, Plano, TX 75025  
Phone: (855) HEART-26

Heart to Heart Hospice Foundation sends its donors acknowledgement of gifts. Please select whether you would like to receive such acknowledgment by  Mail (or)  Email.

Donor Information

Donor's Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Address: \_\_\_\_\_ Suite/Apt # \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Yes, I would like to receive the Heart to Heart Hospice Foundation newsletter.

Donation Information

Donation amount: \$ \_\_\_\_\_  
Please select a payment type for this donation.  
 Cash  Check: # \_\_\_\_\_ (or) Credit Card:  Amex  Visa  MC  DC  
Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CID Code: \_\_\_\_\_  
Name as appears on card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Please select one of the following, if applicable:  In loving memory of (or)  In honor of:  
Name: \_\_\_\_\_

Please send an acknowledgment to:

Name/Organization: \_\_\_\_\_  
Address: \_\_\_\_\_ Suite/Apt: # \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
How is this person related to the honor/memorial name: \_\_\_\_\_

**Make a Difference Today!**  
Heart to Heart Hospice Foundation is a 501(c)(3) public charity.