



## Donation Form

I/we would like to help perpetuate Sunrise Haven's high standard of Christian Science nursing care. Please use my/our tax-deductible contribution for the following:

General Fund                      \$ \_\_\_\_\_

Benevolence Fund                \$ \_\_\_\_\_

Total:                                \$ \_\_\_\_\_

\_\_\_\_\_ My check, payable to Sunrise Haven, is enclosed.

\_\_\_\_\_ My employer will match my contribution. The company's matching gift form is enclosed.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Please add me to your newsletter mailing list.

\_\_\_\_\_ Please call me about opportunities to volunteer.

My phone number is \_\_\_\_\_ (day) \_\_\_\_\_ (evening).

Thank you!

The generosity of friends such as you has helped Sunrise Haven provide Christian Science nursing services in this region for almost 60 years.

Income from nursing services does not cover our operating expenses.

Your gift is vital to the continuation of our healing work.

Perhaps you would like to consider adding Sunrise Haven to your will or estate planning, naming us as one of the nonprofit beneficiaries you support.

This is an excellent way to help provide funding for Christian Science nursing in this region.

(09/28/07)

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