



# TAX-DEDUCTIBLE DONATION FORM

Thank you for your support of the mission of the ASMBS Foundation, to improve the lives of people who suffer from morbid, or clinical obesity. Contributions from caring and concerned individuals and organizations help to advance education and research in an effort to control and treat this devastating disease.

**Donating by mail:**

Please complete this form and send it with your check, money order or credit card information to the ASMBS Foundation at the address listed below:

ASMBS Foundation  
100 SW 75th Street, Suite 201  
Gainesville, FL 32607 (USA)

**Donating by fax:**

Print this form and fax with your credit card information to **(352) 331-4975**.

**Donor Information:**

Gift Amount (U.S. Dollars):

\$25    \$50    \$100    \$150    Other \$ \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**Payment Information:** Choose method of payment.

Enclosed is my check payable to the ASMBS Foundation, for: \$ \_\_\_\_\_

Please charge my gift to my credit card in the amount of: \$ \_\_\_\_\_

→  Mastercard    Visa    Amex

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

\_\_\_\_\_  
Name on Card (please print)

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Billing Zip Code

\_\_\_\_\_  
Signature