



2015 Donation Form

(Please fill out completely and fax or mail to the March of Dimes)

Please keep a copy of this form for tax purposes.

Date:	
Contact Name(s):	
Company:	
Address:	
City, ST, ZIP:	
Phone:	
Email:	
<u>DETAILED</u> description of donation(s)	\$\$\$ Value
GIFT CERTIFICATE: Please mail to March of Dimes, 3351 Claystone St SE Suite G20, Grand Rapids, MI 49546	
Comments or special instructions:	
Available for pick up on: (date) _____ (time) _____	
Volunteer/committee member who secured item: _____	

**Thank you for supporting the March of Dimes mission of improving the health of babies
by preventing birth defects, premature birth and infant mortality.**

3351 Claystone St. SE, Suite G20, Grand Rapids, MI 49546
Phone:(616) 247-6861 Fax:(616) 247-6864 Email: posborn@marchofdimes.org