



National Kidney Foundation[™] of Illinois

Thank you for helping us “chart the course” by making a year-end gift!

Enclosed is my gift of:

\$500 \$250 \$100 \$50 \$35 Other: _____

*Please make your check payable to the **National Kidney Foundation of Illinois***

Please charge my:

Visa Mastercard Discover American Express

Card # _____ Exp. Date _____

Name listed on card: _____

Signature of cardholder: _____

Your name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Please send information on:

- volunteer opportunities calendar of events
 volunteer opportunities for my employer including the NKFI in my estate plans

Please mail or fax this form to:
National Kidney Foundation of Illinois
215 West Illinois, Suite 1C
Chicago, IL 60610
312.321.1505 fax

Thank you for your gift. Your information is confidential and is not distributed to any outside party. Gifts to the National Kidney Foundation of Illinois are eligible for tax deduction. Please consult your financial advisor for more information.