

# Help us show **what knowledge can do.**

Your gift to Toronto General & Western Hospital Foundation will help us pursue the knowledge that makes all our lives better. Thank you!

**Please accept my gift of \$** \_\_\_\_\_

This is a (check one):

- One-time gift**
- Recurring **monthly gift** (please choose from the options below)
  - I authorize Toronto General & Western Hospital Foundation to receive the above amount on the  1<sup>st</sup> or  15<sup>th</sup> of every month or the next business day
  - Please debit my bank account monthly (please provide a blank cheque marked VOID)
  - I prefer to use my credit card (please fill out credit card details below)
- Pledge** to be paid equally in annual payments over \_\_\_\_\_ years.  
Please process my first payment of \$\_\_\_\_\_.

Is this gift on behalf of an organization?  Yes  No

If yes, organization name: \_\_\_\_\_

## Donor Information

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

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

City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Is this gift in honour or in memory of someone?  Yes  No

If yes, please provide details on the next page.

## Payment Information

I've enclosed a cheque payable to Toronto General & Western Hospital Foundation

I would like to pay by:  Visa  MasterCard  American Express

Card No.: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_ Expiry: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## In Honour / In Memory Giving

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In honour     In memory

Name of person you are commemorating: \_\_\_\_\_

Would you like to send an acknowledgment card?     Yes     No

If yes, please provide recipient info:

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

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

City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Special message: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Estate Giving

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Please send me information about leaving a gift to Toronto General & Western Hospital Foundation in my Will

I have already included Toronto General & Western Hospital Foundation in my Will

### Please return this form to:

Toronto General & Western Hospital Foundation  
R. Fraser Elliott Building  
190 Elizabeth Street, 5th Floor  
Toronto, ON M5G 2C4

**Thank you for your generous support!**

For donations less than \$20, receipts issued upon request only.



R. Fraser Elliott Building, 5th Floor, 55-801, 190 Elizabeth Street, Toronto, ON M5G 2C4  
T 416-340-3935    F 416-340-4864    E foundation@uhn.ca  
Toll Free 1-877-846-4483 (1-877-UHN-GIVE)    tgwhf.ca  
Charitable Organization No. 12386 4068 RR0001