



## Yes! I will join Hamakua-Kohala Health in improving the health of our community!

**Your generous gift is tax deductible.**

Here is my gift of: \_\_\_\_\_ \$25 \_\_\_\_\_ \$50 \_\_\_\_\_ \$100 \_\_\_\_\_ \$250 \_\_\_\_\_ \$500  
\_\_\_\_\_ \$1,000 \_\_\_\_\_ \$2,000 \_\_\_\_\_ \$5,000 \_\_\_\_\_ \$30,000 \_\_\_\_\_ Other \$ \_\_\_\_\_

\_\_\_\_\_ I have enclosed my check payable to Hamakua-Kohala Health.

\_\_\_\_\_ I prefer to use my credit card.    Visa    Mastercard    AMEX

Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_ CVC: \_\_\_\_\_

Name on card: \_\_\_\_\_

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

My phone number is: (\_\_\_\_\_) \_\_\_\_\_

My address is (so we may mail you a receipt for your tax records):

\_\_\_\_\_  
\_\_\_\_\_

My email address is: \_\_\_\_\_

Please make a copy of this form for your tax records.

Hamakua-Kohala Health has been here for you for 52 years, and needs your help now. Thank you for thinking of our community. Please feel free to contact me with any questions:

Irene Carpenter  
Chief Executive Officer  
Hamakua-Kohala Health  
(808) 775-7204