

# Expressions of Gratitude

Whether you are grateful for the personal care you received, the care of a loved one, or if you are simply inspired by others' stories, there is no better way to express your gratitude than with a gift that will have a lasting benefit in the lives of the individuals and families who need us most.

## Gift Information:

Enclosed is my check for \$ \_\_\_\_\_ made payable to Advocate Charitable Foundation.

To make your gift via credit card, please visit our secure giving page at [advocategiving.org/expressgratitude](https://advocategiving.org/expressgratitude).

I wish to make my gift anonymously.

## Please direct my gift to:

Advocate hospital or site of care: \_\_\_\_\_

Specific program or service: \_\_\_\_\_

**This gift is made:**  in memory of  in honor of Name: \_\_\_\_\_

Please notify the following of my honor/memorial gift:

Name(s): \_\_\_\_\_ Relationship to honoree: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## Donor Information:

Name(s): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_  Cell  Home  Work

Email address: \_\_\_\_\_

I would like to receive email updates from Advocate Charitable Foundation about events, impacts and more.

## Please send the completed form with your check to:

Advocate Charitable Foundation  
Gift Processing Center  
3075 Highland Parkway, Suite 600 | Downers Grove, IL 60515

