



Gift amount

\$ _____

Please keep my contribution anonymous

Please complete this form and mail it along with your check made out to Iowa CareGivers to:

Iowa CareGivers
939 Office Park Road #332
West Des Moines, Iowa 50265

Information@iowacaregivers.org
www.iowacaregivers.org
(515) 223-2805

To donate online:
iowacaregivers.org/donate

Your contribution may be tax deductible as prescribed by law. Donors will be listed in the Iowa CareGivers newsletter and other public announcements unless otherwise instructed. Iowa CareGivers is a 501(C)(3) nonprofit.

Giving Options

General Contribution:

PLEASE SELECT WHERE YOU WOULD LIKE YOUR CONTRIBUTION TO BE APPLIED.

- Education, Skill-Building, and Scholarships
- Self-Care Program for Paid and Family Caregivers
- Centenarian Celebration
- Issue Advocacy
- Greatest Need

Iowa CareGivers Endowment:

Help Ensure the Best Care and Support Possible for Those in Need

I would like to learn more about the Iowa CareGivers Endowment

My contribution is:

In Honor of In Memory of

Full name of Honoree or Memorial:

Mailing Address of Honoree or Family of Memorial:

Comments

Donor Information:

Please List How You Wish Your Name to Appear in the Annual Report and Other Publications.

Name/s:

Home Address:

City:

State: Zip: County

Phone (home):

Phone (work):

Phone (cell):

Email Address:

(emails are not shared with others)