

Instructions:

Mail completed form along with a personal check, money order or credit card information to the following address:

Smithwright Services
Attn: Administrative Manager
19910 50th Ave. W., Ste 102
Lynnwood, WA. 98036

Smithwright Services continues to offer **quality care** thanks to the support of generous individual donors. We welcome all levels of donation, whether it's a one-time gift, or a monthly donation. Your donation can even be in honor of someone else and their name will be featured on our Supporters page. *Smithwright* strives to be the **best residential care agency** in the region.

Donation form is on next page below.



Smithwright Services

empowerment autonomy connection

Smithwright Services is exempt under Section 501(c)(3) of the Internal Revenue Code, making this gift tax deductible.

Please return this gift form to:

Smithwright Services
19910 – 50th Ave. W. Suite 102
Lynnwood, WA. 98036
(425) 775-6801 x16
Fax: (425)775-6929

DONOR INFORMATION

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

DAYTIME PHONE () _____ E-MAIL ADDRESS _____

- YES, I would like to be added to your e-mail list.
 YES, I would like to be added to your mailing list.

THIS IS HOW I WOULD LIKE MY GIFT DESIGNATED

- Agency Needs-as specified by the Executive Director
 Group Home
 Supported Living
 Children's Programs
 Other _____

GIFT INFORMATION

- Enclosed is my gift of \$ _____ (Please make check payable to Smithwright Services)
 Please charge my credit card for \$ _____
 Discover Card MasterCard Visa American Express

Credit Card Number _____ Expiration Date _____

Name on Card _____

Signature _____

If you would like to make your gift in honor of someone special, please see second page.



MEMORIAL AND TRIBUTE FORM (OPTIONAL)

SEND GIFT NOTIFICATION TO:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

We will send a card to your gift recipient.