

# AVIANT Hospice Donation Form



The team at AVIANT Hospice will forward a personalized letter thanking you for your thoughtful contribution as well as a receipt for tax purposes. We will also send a letter to the family of the loved one you are honoring.

Call AVIANT Hospice in the event you have additional questions at 480.398.2411

## Print this form and mail it along with your donation to:

AVIANT Hospice  
Attn: Donations  
2430 W Ray Rd., Ste 3 • Chandler, AZ 85224

## Donor Information

Name: First Last Organization (if applicable):

Address: Apt./suite #:

City: State/province: Zip:

Phone (for questions regarding your donation) Email:

## Donation Information

Amount In honor of (name): In memory of (name):

Please send an acknowledgment to (name): Acknowledgement's relationship to honoree:

Address: Apt./suite #:

City: State/province: Zip:

Phone (for questions regarding your donation) Email:

## Method of Donation:

Checks: Make Payable to AVIANT Hospice  
Card Type: Visa Master Card American Express Discover

Name as it appears on card

Card Number Expiration Date CV

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Signature