YES! I want to help Presbyterian SeniorCare Network make aging easier!

DONOR INFORMATION

NAME	O I wish to be Anonymous.
ADDRESS	O Please send me information about including Presbyterian SeniorCare in my Will.
CITY STATE ZIP	O I have remembered Presbyterian SeniorCare Network in my will/estate plans.
PHONE	
EMAIL	
GIFT INFORMATION	
○ \$2,500 ○ \$1,000 ○ \$500 ○ \$250 ○ \$100 ○ \$50 Other \$	My gift is designated for:
*Become a member of The Cornerstone Society with a gift of \$1,000 or more for benevolent care or general (unrestricted) support.!	O Benevolent (charitable) care for a needy resident
I have enclosed my check made payable to: Presbyterian SeniorCare Foundation	O General Fund (unrestricted) to help with unexpected needs that arise O Other:
Please charge my: O VISA O MasterCard O Discover O American Express	
CARD NUMBER	My gift is for the following Presbyterian SeniorCare Network community:
	O No specific location
EXP. DATE SECURITY CODE	O Erie - Elmwood Gardens O Erie – Manchester Commons
SIGNATURE (required for credit card)	O Longwood at Oakmont O Oakmont campus
TRIBUTE GIFTS	O Oil City – Oakwood Heights O Shenango on the Green O Washington campus
IN MEMORY OF	O Other:
IN HONOR OF	
Please notify the individual(s) below of this gift (without gift amount):	If you or your spouse are employed by a company with a Matching Gift program, your contribution
NAME	to Presbyterian SeniorCare Network could mean twice as much, or more! See your Human
ADDRESS	Resources office to obtain the necessary form.
CITY STATE ZIP	

Please mail your completed form and payment to:

Presbyterian SeniorCare Foundation

1215 Hulton Road Oakmont, PA 15139

A copy of the official registration and financial information may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1-800-732-09999. Registration does not imply endorsement.