

Please include a completed copy of this form with your mail-in donation

I would like to invest in supporting Alc I have enclosed the following gift of:	O \$2,500	O \$1,000	earch agenda. O \$500 O other \$	O \$250
Your contribution of \$500 or more may be paid in installments over several months. We also encourage annual and quarterly pledges.	I pledge a total of \$to be paid in installments over the following #months/years or quarterly (choose one).			
Please print the following information	Name Address			
Please make your check payable to Public Health Institute	City () Phone/day Email	Stat	ce () Evening () Fax	Zip

The Public Health Institute is a nonprofit 501(c)(3) organization. All contributions are tax-deductible to the extent allowable by law.

The PHI tax ID number is 94-1646278.