

Donate to

POST-POLIO HEALTH
INTERNATIONAL
INCLUDING INTERNATIONAL VENTILATOR USERS NETWORK

Yes, I would like to make a donation to Post-Polio Health International:

Your Name _____

Address _____

City _____ State _____ Zip code _____

Phone _____ Email _____

- This donation is in someone's memory. This donation is in someone's honor.

Name of honoree _____

Please send an acknowledgement to: Name _____

Address _____

City _____ State _____ Zip code _____

PHI has the following funds to direct your donation towards. Please select from the list below:

- The General Fund
- The Research Fund
- The Joyce & Arthur Siegfried Memorial Fund (braces & shoes for polio survivors)
- The Gilbert Goldenhersh Memorial Fund (braces & shoes for Missouri polio survivors)
- Where it is needed most

Payment Choice:

- I am enclosing a check for \$_____ made payable to "Post-Polio Health International" (USD Only)
 Please charge \$_____ to this credit card: VISA Mastercard Discover AMEX

Card No. _____ Exp. Date _____

Signature _____ CVV Code _____

Send to:

Post-Polio Health International
50 Crestwood Executive Ctr. #440
St. Louis, MO 63126

314-534-0475 · 314-534-5070 fax · info@post-polio.org