

Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____

List me in the Annual Report
as follows (Leave blank if
your gift is anonymous.):

() -
Telephone (Circle one: H / W / C)

PAYMENT OPTIONS

I would like to show my support with a gift of: \$ _____

Enclosed is my check payable to “*Orange Grove Center.*”

Bill Me. (Be sure to include your address above.)

Cash Enclosed.

I have included Orange Grove Center in my will, trust or other estate plans.

One-Time

Bi-Annually

Annually

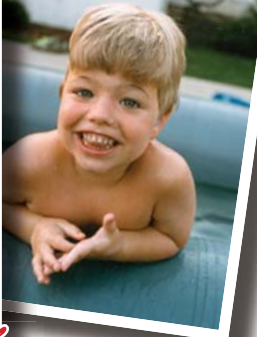
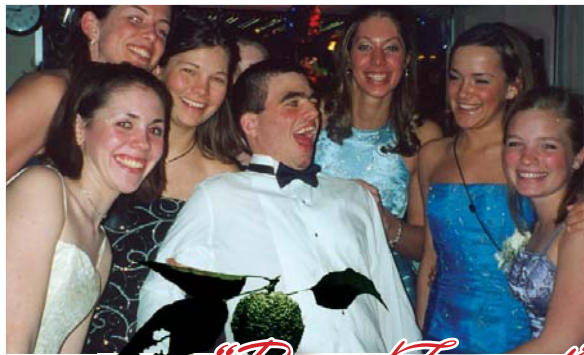
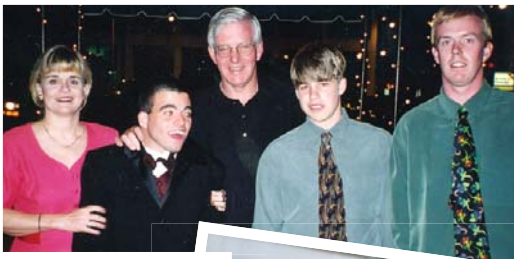
Monthly

Quarterly

Please make my gift _____ in honor of _____ in memory of _____ (name)

Matching Gift - Are you employed by a matching gift company? Many companies will match your gift, multiplying its value. Check with your employer for more details.

Thank you for your generous contribution to Orange Grove Center!



"Be a Friend"

Make a difference in the lives of the individuals served by Orange Grove Center!
Orange Grove Center • 615 Derby Street • Chattanooga, TN 37404 • (423) 629-1451