Kennebec Mental Health Associates (KMHA) Foundation Donation Form

ABOUT YOU:

Name(s) _____

(As you wish to be acknowledged in our Annual Report) ( ) I wish to remain anonymous

Company (if applicable) _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

Phone ( ) _____ **( ) Home ( ) Cell ( ) Work**

Email _____

The KMHA Foundation supports all programs and services of Kennebec Behavioral Health. The KMHA Foundation is a 501(c)(3) charitable organization. Gifts to the KMHA Foundation are tax-deductible as allowed by law.

Thank you for your support!

Every gift is someone's next step toward recovery.

Please mail me/us information about:

- ☐ Gifts of Stock
- ☐ Planned Giving Options
- ☐ I/We have included Kennebec Behavioral Health in my/our will

Kennebec BEHAVIORAL HEALTH

GIFT DESIGNATION:

- ☐ Unrestricted (greatest need)
- ☐ Children's Services
- ☐ Vocational Clubhouses
- ☐ Services for the elderly
- ☐ Other _____

In honor of _____

In memory of _____

_____

ABOUT YOUR GIFT:

I/We would like to make a gift to support Kennebec Behavioral Health services.

( ) $1,000 ( ) $500 ( ) $250 ( ) $100 ( ) $50 ( ) $25 ( ) Other $ _____

( ) Check enclosed (made payable to KMHA Foundation)

( ) Credit/debit card ( ) VISA ( ) MasterCard

Card # _____

Exp Date _____ **CVV Code (3-digit code)** _____

Signature _____

( ) Please bill me

( ) I would like to give this amount annually

Gifts that are not designated (at left) will be considered unrestricted.

For more information about Kennebec Behavioral Health, contact us at 873-2136 or visit www.kbhmaine.org

Return to:

Development Office

KMHA Foundation

67 Eustis Parkway

Waterville, ME 04901-5173

Thank you!