



DONATIONS FORM

In consideration of the gifts of others, I/We would like to donate the following to Ballou:

\$25 \$50 \$100 \$250 \$500 \$1,000 Other \$ _____

Designate my/our gift to: Best use; Activities; Nursing; Technology;

Staff Development; Building/ Grounds; Other _____

I/We wish to make my/our contribution as follows:

Check/Cash enclosed (Please make check payable to “Ballou”)

Pledge: Quarterly Semi-Annually Annually / Number of Years? _____

This gift is: In Memory of/ In Honor of: _____

Your Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Best Telephone: _____ Email: _____

Double your gift. Please send your employer’s matching gift form.

Alternative ways of giving. Please tell us how we can enjoy Life Income/Tax Benefits.

Bequest. I/We intend to provide for Ballou in my/our will.

Please mail this completed form and a check (“Ballou”) to

**Development Office
Ballou Home for the Aged
60 Mendon Road
Woonsocket, RI 02895**

All donations to Ballou are tax-deductible to the fullest extent allowed by law.

Thank you for your support!