

of Arizona



## Hero to Hero: A Kidney Campaign

## Donor Agreement

Tax ID # 86-6052343

National Kidney Foundation Arizona 360 E. Coronado Rd. #180 Phoenix, AZ 85004

I/we will contribute to the NKF AZ Hero to Hero Campaign. This gift will be made in terms of cash, securities and /or marketable real or personal property totaling \$\_\_\_\_\_ payable over the next \_\_\_\_\_ year(s).

The gift will be made following the payment schedule as outlined:

Amount of Payment	Payment Date
\$	, 2024
\$	, 2025
\$	, 2026

Payment Method:

	The initial payment of \$ is enclosed. (Checks payable to NKF AZ – Hero to Hero Campaig	n)
	Please bill me (Circle One) Monthly Quarterly Annually	
	Payment by credit card (Circle One): Monthly Quarterly Annually	
Credit C	Card: MasterCard Visa American Express	
Card #	Exp. Date:/ CVV Code:	
Name	Signature	
	charge \$ Monthly on(Date) Quarterly on(Date) ually on(Date)	
	owing is how I would prefer the company name/personal name to appear on any campaign recognitio	on.
	ny Name	
Mailing	Address Day Phone	
City/Sta	te Zip Evening Phone	
E-mail _		
	Please do not print the company or personal name on any campaign materials, as we wish to remain	n anonymous
	This gift is an honor or memorial donation:	
	In Honor of	
	In Memory of	
	My gift is to stay in AZ (check here)	
Date	Signature	