



Yes! I support LifeShare Blood Center!

Please use my gift to Support:

- Area of Greatest Need
- Blood Donor Education, Recruitment & Collections
- John J. Moulds Reference & Scientific Support Laboratories
- Equipment & Facilities Improvements
- LifeScholars Scholarship Program
- Bone Marrow Program
- Other (Describe): _____

Check # _____ endorsed in the amount of \$ _____
 Name _____
 Company _____
 Address _____
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 Phone _____ Email _____

Credit Card Contribution:

Amount \$ _____ Credit Card: Visa MC AMEx Discover
 Name as it appears on card: _____
 Billing Address (if different from above): _____
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Is this a one-time gift? Yes, in the amount of: _____ OR
 Is this a recurring gift? (please circle one) Monthly Quarterly Annually

This gift is in MEMORY or HONOR of (name /s):

1. _____ 2. _____
 Please notify (name and address):
 1. _____ 2. _____

Thank You for your thoughtful gift!

For more information about contributions, visit lifeshare.org or call 318.651.4415

Please remit to:
 LifeShare Blood Center
 Attn: Development Department
 8910 Linwood Avenue, Shreveport, LA 71106-6508