

# Donor Information

Name(s) \_\_\_\_\_

For recognition I/we should be listed as:  
\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Email \_\_\_\_\_

Amount of Gift \$ \_\_\_\_\_

Date \_\_\_\_\_

### Payment:

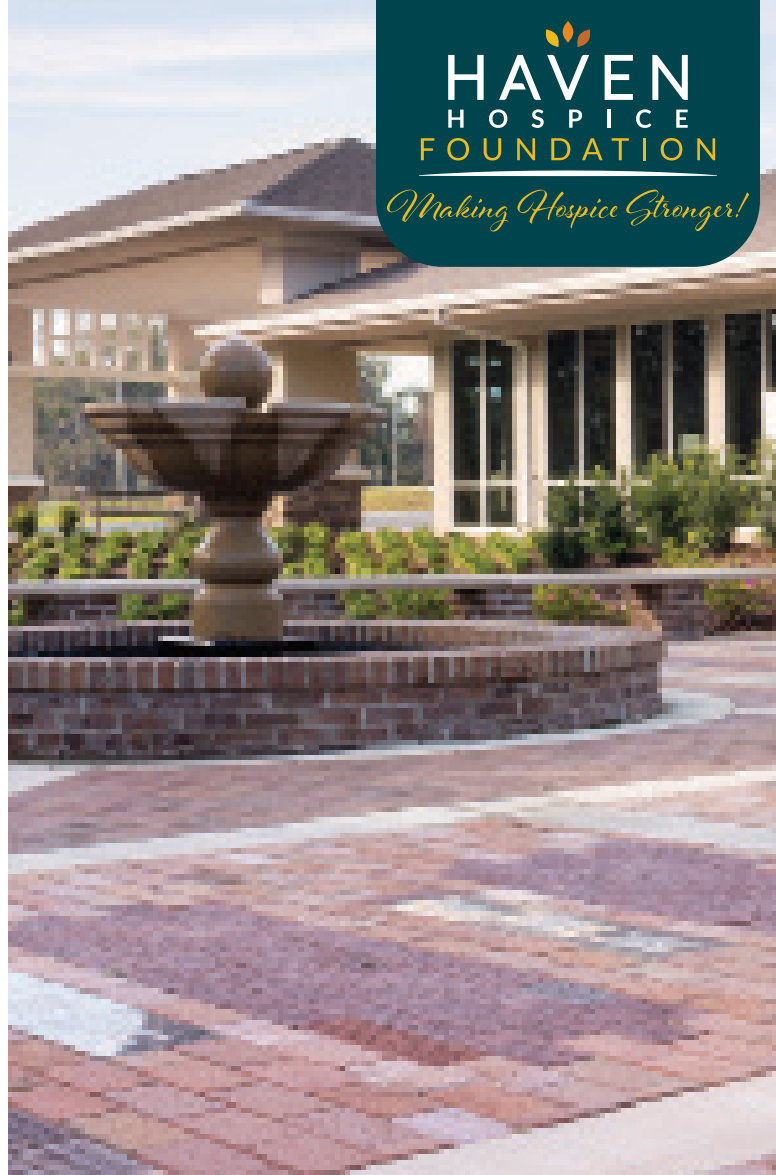
I plan to use the following payment method(s) for this gift:

Check  Credit Card

**If you'd like to donate via credit card,  
please visit [HavenHospice.com/MemorialWalkways](https://www.HavenHospice.com/MemorialWalkways).**

*Please make tax-deductible contributions payable to  
**Haven Hospice Foundation** and return them to:  
4200 NW 90th Blvd., Gainesville, FL 32606*

For more information or to make a donation, please contact:  
800.727.1889



## Memorial Walkway

*The walkways at Haven Hospice comfort care centers are dedicated to your loved ones.*

Family members and friends can honor a special person by placing a brick, an engraved granite marker, a bench or a picnic set along one of the walkways at a Haven care center. Your memorial walkway gift benefits hospice care and specialty programs for patients and families in North Florida.



*Making Hospice Stronger!*

