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Charge my credit card (Visa, Mastercard, American Express, or Discover).
Credit Card Number:
Exp. Date: 3-Digit Security Code: Billing Zip Code:
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<u>Optional</u>
I would like to make my gift:
In honor of
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Anonymous
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Learning more about making a gift to the Clinic in my will.

If you wish to make an anonymous contribution through the Charitable Gift Fund Program at Anabaptist Foundation, please email giftfund@afweb.org or call 1-800-653-9817 ext. 209.

## THANK YOU FOR YOUR GENEROUS SUPPORT!

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