

Contributions Form – Friends of Ostomates Worldwide-USA

Name _____

Contribution Levels

Address _____

Partner, \$50

Corporate, \$300

City _____

Sustaining, \$75

Benefactor, \$1000

State _____ Zip _____

Contributing, \$150

Lifetime/
Memorial, \$5000

Country _____

Supporting, \$300

Other (Any Amt)

Telephone _(____)_____

Chapter, Group, or Association (Any Amt)

E-mail Address _____

All donations to FOW-USA are tax deductible.

Total Amount Enclosed \$ _____

Make checks payable to **FOW-USA**.

Please mail to: FOW-USA Headquarters, 1500 Arlington Ave., Louisville, KY 40206-3177.