



120 Wall Street, New York, New York 10005-3902 212-742-9000 (24 hours) Fax: 212-269-3139 [www.eyedonation.org](http://www.eyedonation.org)

**I want to share in The Eye-Bank's miracles of sight restoration.**

My contribution of \$\_\_\_\_\_ is enclosed.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please charge my VISA/MASTERCARD: \_\_\_\_\_

Signature \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**The Eye-Bank will send a special notice for your Honorary or Memorial gift.**

This gift is in memory of: \_\_\_\_\_

This gift is in honor of: \_\_\_\_\_

Special Occasion: \_\_\_\_\_

Please acknowledge my gift without specifying the amount to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Does your company match your gift? Yes \_\_\_\_\_ No \_\_\_\_\_

**To make a contribution online go to [www.eyedonation.org](http://www.eyedonation.org)**

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