



## Donor Response Card

**YES**, I would like to become a founding donor of Harmony Medical Foundation (HMF). HMF is a GA nonprofit corporation in the process of applying for 501 (c)(3) status.

I would like to contribute in the following way(s):

- Contribute to Mercer University School of Medicine and earmark funds for Harmony Medical Foundation/Mercer Medical Clinic partnership
- I will make a pledge to be paid when Harmony Medical Foundation non-profit status is approved as a 501(c)(3)
- Donate now to Harmony Medical Foundation with the possibility of no tax deduction until non-profit status is approved as a 501(c)(3)
- Please contact me. I have other thoughts to share and/or would like to share Harmony Medical Foundation's mission with a potential donor.

## Payment:

My check is enclosed, made payable to:

\_\_\_\_\_

Make my donation online at:

[www.harmonymedicalcenterlakeoconee.com/hmf](http://www.harmonymedicalcenterlakeoconee.com/hmf)

I would like for my donation to be:

In honor of \_\_\_\_\_

In memory of \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Organization \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ ZIP \_\_\_\_\_