



JFS DONATION FORM

Welcome to Possibility...

I/We support the work of Jewish Family Services

Please accept my gift in the amount of:

\$18 \$36 \$54 \$72 \$100 Other \$ _____

Enclosed is a check payable to Jewish Family Services.

I would be interested in making a gift of appreciated stock. Please call me.

Please charge our gift to: Visa MasterCard Discover Card

Card Number: _____

Expiration Date: _____

CVV#: _____

Signature: _____

You may also make a donation online at www.jfsmilw.org

Your contribution is tax deductible under IRS guidelines.

My/Our Information

Name(s): _____

Address: _____

City: _____

State: _____

Zip: _____

Phone (home): _____

Email: _____

Please do NOT include us in the annual listing of donors.

I would like to help JFS reduce costs by allowing the agency to communicate with me (us) electronically.

I have included JFS in my will.

Please send me more information about how to include JFS in my will.

This contribution is a tribute gift:

Please check one: In honor of In memory of In appreciation of Speedy Recovery

Please send acknowledgement of my gift to the following:

Names (s): _____

Address: _____

City: _____

State: _____

Zip: _____

Phone (home): _____

The message on the card should read *(please include an additional sheet if necessary):*

Please mail gift to:

JEWISH FAMILY SERVICES
1300 N. JACKSON STREET
MILWAUKEE, WI 53202-2602

Phone: 414-390-5800

Fax: 414-390-5808

For more information, or to fill out our
online donation form, please visit:

www.jfsmilw.org