

Strength in optimism. Hope in progress.

Donor Information):				
Name:					
Address:					
City:			State:		Zip:
Phone #:			Email:		
This gift is in					
Memory of:			Honor of:		
Kindly Acknowledge	e:				
Address:					
City/State/Zip:					
Enclosed is my check in the amount of \$					
Credit Card Type:					
Amex	Discover	Visa		MasterCard	
Credit Card #	Security Code				
Expiration Date:	Amount: \$				

Please mail back to:

APDA MA Chapter

15 S Main Street

PO Box 272

Sharon, MA 02067

Or you can email to: jvanderstad@apdaparkinson.org

Double your gift through a corporate matching gift program. Ask your company's human resources office to find out if your company has one. Did you know you can leave a legacy of caring by including APDA in your estate plans? For further information, please contact Jessica van der Stad at jvanderstad@apdaparkinson.org or call 617.634.2497.