

# PRINT & SEND DONATION FORM

Please mail your tax-deductible donation with this form to:  
Second Harvest Food Bank of Middle Tennessee  
331 Great Circle Road  
Nashville, TN 37228



## Donor Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Organization: \_\_\_\_\_

## Address Information

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

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

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

Yes, I would like to receive online communications from Second Harvest Food Bank of Middle Tennessee.

## Gift Amount (please check one)

\$250       \$100       \$50       \$25       Other Amount: \_\_\_\_\_

## Would you like to designate your gift to one of the following Second Harvest programs?

I want to help where most needed       Backpack Program       Emergency Food Box Program  
 Kids Cafe       Middle Tennessee's Table       Mobile Pantry

## Payment Options

I have enclosed a check

I would like to charge my contribution

Card Type: \_\_\_\_\_ Card Number: \_\_\_\_\_

Card Exp (MM/YYYY): \_\_\_\_\_ Signature: \_\_\_\_\_

## Honor/Memorial Gifts

If you would like to make this contribution in someone else's honor, please let us know the honoree's name in the space below.  
If you would also like us to send them an acknowledgment, please include their address.

Please check which type of gift applies:       Honor Gift       Memorial Gift

## Honoree Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

## Honoree Message

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## Thank you for your donation!

You will receive acknowledgment for tax purposes in the mail within two to four weeks.

Second Harvest Food Bank of Middle Tennessee is a 501 (c)(3) non-profit recognized by the IRS.  
For every \$1 you donate, Second Harvest Food Bank of Middle Tennessee provides 4 meals to hungry men, women and children in our 46 county service area.  
To donate now, call 615-329-3491.