

Rice Lake Area Free Clinic - Volunteers in Medicine

Donation Form

Join the *Rice Lake Area Free Clinic – Volunteers in Medicine (RLAFC-VIM)* in its efforts to create a healthier community in Barron, Rusk and Washburn Counties. With your support, we can make a difference in families who are unable to afford basic health care services.

I would like to help and make a tax-deductible contribution to RLAFC-VIM

My gift of \$ _____ is enclosed.

_____ I would prefer to keep my gift anonymous.

Name: _____

Organization: _____

Address: _____

City: _____

State/Zip Code: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

My gift is honor of: _____

My gift is in memory of: _____

My preference for gift acknowledgement is:

_____ Mail _____ Email Phone: _____ Home _____ Work

Please send your contribution to:

RLAFC-VIM
1035 North Main Street
Suite G02
Rice Lake, WI 54868

Thank you for your gift.