



**The Heart and Vascular Institute**  
 Shannon Tower, Director of Development  
 Fund for Johns Hopkins Medicine  
 600 N. Wolfe Street, Blalock 536 | Baltimore, MD 21287  
 www.hopkinsmedicine.org/heart\_vascular\_institute | 443-287-7384

# Charitable Giving Form

## CASH GIFT

Gift amount: \$ \_\_\_\_\_ (Gifts are tax-deductible in accordance with the Internal Revenue Code.)

I have enclosed a check for \$ \_\_\_\_\_.

(Please make your check payable to The Johns Hopkins University and indicate in the memo the specific physician or fund you wish to support.)

I wish to make my gift by credit card:  VISA  MASTERCARD  AMEX  DISCOVER  
 Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Name on Card \_\_\_\_\_  
 Signature \_\_\_\_\_

I pledge \$ \_\_\_\_\_ to be paid in amounts of \$ \_\_\_\_\_ over \_\_\_\_\_ years. I will begin the pledge on  
 \_\_\_\_ / \_\_\_\_ / \_\_\_\_ . \*I qw'y knlt gegkxg'c'ppwcn'r'rgf i g't go kpf gt u0\*

My company or my spouse's company will match my gift.

## GIFT DESIGNATION

Please designate my gift:

- Where the need is greatest.
- To support the work of Dr. \_\_\_\_\_  
 \*\*\*\*\*r'rgcug'dg'c'u'ur'gekk'e'c'u'r'quaklrg+''
- Other: \_\_\_\_\_

## RECOGNITION

Donors may be recognized in publications. Please print your name as you wish it to appear, including your preference for Mr., Mrs., Ms., Dr. R'rgcug'p'qvg'h'i' qw'y kuj 'vq' t go c'kp'c'pqp{o qmu0

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_  
 Zip \_\_\_\_\_ Phone \_\_\_\_\_

## ADDITIONAL WAYS TO GIVE

- I am making my gift with appreciated securities.
- I have included the Heart and Vascular Institute at Johns Hopkins in my will, a trust, or other financial plans.
- I would like information on how to include the Heart and Vascular Institute at Johns Hopkins in my will.
- I would like to know more about gifts that provide income for life to me and/or another beneficiary.
- I would like information on tax benefits to me from gifts of:
  - appreciated securities
  - life insurance
  - real estate
  - antiques, artwork, or other personal property
- I would like to know more about ways of giving to the Heart and Vascular Institute.
- Please call me at this #: \_\_\_\_\_. The best day and time to call is \_\_\_\_\_.

**MAIL THIS FORM TO:**  
**The Heart and Vascular Institute**  
**Shannon Tower, Director of Development**  
**Fund for Johns Hopkins Medicine**  
**600 N. Wolfe Street, Blalock 536**  
**Baltimore, MD 21287**

For more information about the Heart and Vascular Institute: [www.hopkinsmedicine.org/heart\\_vascular\\_institute/](http://www.hopkinsmedicine.org/heart_vascular_institute/)

I knu'vq'Lqj pu'J qrnkpu'O gf kelpg'ct g'wmlgev'vq'yj g'r qnkekgu'qhl'yj g'f'p'knkwkqu'kp'r'rc'eg'c'v'v'j g'v'ko g'q'hl'yj g'i'kh0Vj gt g'ht g.'c' r'qt'v'q'p'q'hl'yj ku'i'kn'y'kn'd'g'f'k'gev'v'q'yj g' Erhpk'ec'ic'pf 'Cecf go ke'Hwpf 'cu'f'k'gev'v'g' 'd'('y' g'Dqctf 'q'hl'v'waggu'q'hl'Lqj pu'J qrnkpu'O gf kelpg'O

A copy of the current annual financial statement may be found at [www.controller.jhu.edu/pubs/financial\\_reports/](http://www.controller.jhu.edu/pubs/financial_reports/).