

**Ohio District Kiwanis Foundation
2009-2010 First Lady's Project Contribution**

Club Name _____ Division _____

Donor's Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Email _____

Amount of Gift _____

I/We designate this gift for Pediatric Trauma grants through the Ohio District Kiwanis Foundation.

I/We wish for our gift of \$500 to provide a Past International Presidents Award for the following person:

Name _____

Address _____

City, State, Zip _____

Phone _____

Club Name _____

Date of Presentation _____

Send materials to _____

Address _____

and for the gift to be split between the Foundation endowment funds and Pediatric Trauma grants.

**Make checks payable to Ohio District Kiwanis Foundation
Send to P. O. Box 1013, Wooster, Ohio 44691**

Thank you for your commitment to our Foundation programs and your support of the First Lady's Project. Your gift will help children receive pediatric trauma prevention and treatment throughout Ohio.

