



# Foundation for Hospices in Sub-Saharan Africa

Federal Tax Identification Number: 16-1590512

## Donation Account Designation Form

Directions:

- 1) PLEASE NOTE: All donations to FHSSA should be sent to:  
Foundation for Hospices in Sub Saharan Africa  
Department 6024  
Washington, DC 20042-6024  
Any other non-monetary correspondence can be sent to the main office in Alexandria, VA (see bottom)
- 2) When sending donations to FHSSA, please use this form. You may photocopy it for repeat use. You may put multiple checks, etc. on each form.
- 3) Please complete contact information for person mailing the checks (so we may contact you with any questions that may arise.)
- 4) Please list all checks, money orders, or cash included.
- 5) Please indicate what each donation is to be put towards (your African twin, Operations, Purchase of pins/books, etc.)
- 6) Please make sure to list in the Notes section the address of anyone who needs an acknowledgement for their donation. If the address is already on the check, simply write "see check."
- 7) Please include in the Notes section any other relevant information for each donation such as whether it is "in honor" or "in memory" of anyone, and to whom the acknowledgement of this type of donation should be sent (name, address, etc.)

Contact information:

Name: \_\_\_\_\_ Hospice or Organization: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Total amount of money enclosed: \$ \_\_\_\_\_

Please list out Checks, Money Orders, Cash:

1) \$ \_\_\_\_\_ (circle) CHECK MONEY ORDER CASH

From (name of donor): \_\_\_\_\_

For (i.e.: twin hospice, operations, etc.): \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2) \$ \_\_\_\_\_ CHECK MONEY ORDER CASH

From (name of donor): \_\_\_\_\_

For (i.e.: twin hospice, operations, etc.): \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

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3) \$ \_\_\_\_\_ CHECK MONEY ORDER CASH

From (name of donor): \_\_\_\_\_

For (i.e.: twin hospice, operations, etc.): \_\_\_\_\_

Notes: \_\_\_\_\_

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4) \$ \_\_\_\_\_ CHECK MONEY ORDER CASH

From (name of donor): \_\_\_\_\_

For (i.e.: twin hospice, operations, etc.): \_\_\_\_\_

Notes: \_\_\_\_\_

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5) \$ \_\_\_\_\_ CHECK MONEY ORDER CASH

From (name of donor): \_\_\_\_\_

For (i.e.: twin hospice, operations, etc.): \_\_\_\_\_

Notes: \_\_\_\_\_

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6) \$ \_\_\_\_\_ CHECK MONEY ORDER CASH

From (name of donor): \_\_\_\_\_

For (i.e.: twin hospice, operations, etc.): \_\_\_\_\_

Notes: \_\_\_\_\_

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