



**FLORIDA VASCULAR
FOUNDATION, INC.**

6816 Southpoint Parkway
Suite 1000
Jacksonville, FL 32216
Phone: (904) 309-6288
www.fvs.org

Florida Vascular Foundation Donation Form

The Florida Vascular Foundation is a not-for-profit entity created to promote education and awareness of vascular diseases among medical professionals and the public in the state of Florida. Your gift will help ensure that students can pursue such a rewarding specialty. Consider it an investment in your own future, as well as in the health and well-being of your family, friends and community.

I would like to make a tax-deductible gift of \$ _____

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email: _____

I am making this gift in honor of _____

I am making this gift in memory of _____

Please notify the following of this honorary/memorial gift:

Name: _____

Address: _____

City/State/Zip: _____

Message (optional): _____

PAYMENT INFORMATION

Mail or Fax to:

Florida Vascular Society
6816 Southpoint Parkway
Suite 1000
Jacksonville, FL 32211
(904) 425-4230

Payment Method:

Check: Please make payable to **Florida Vascular Foundation**

Tax ID# 26-3038752

Credit Card:

MasterCard VISA AMEX DISCOVER

Credit Card #: _____

Expiration Date: ____ / ____ Security Code (3 or 4 digit #): _____

Cardholder Signature: _____