



Please mail this form with your enclosed check or credit card information to the following address:

International Medical Corps - Gift Processing Center
File 2156
1801 W Olympic Blvd
Pasadena, CA 91199-2156

- Enclosed is my check made payable to International Medical Corps for: \$ _____
- I'd like to make my gift by credit or debit card for: \$ _____
- This gift is in honor / memory of. I have enclosed a note with the name, mailing address and message for a tribute card.

Credit Card Information:

- Visa MC AMEX Discover

Card Number: _____

Name on Card: _____

Expiration Date: _____ CVC Number: _____

Signature: _____

Phone: _____ Email: _____

- I would like to make this a monthly donation.

Please include your mailing information so we can send a receipt of your tax-deductible gift:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

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Thank you for your generosity. Want to get important updates on our global lifesaving work? Text JOIN to 41612 and join our texting update list! By participating, you agree to the terms & privacy policy (tandcs.us/imc) for autodialed donation messages from International Medical Corps to the phone number you provide. No consent required to buy. Msg&data rates may apply.

FROM RELIEF TO SELF-RELIANCE

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