Giving to Vanderbilt University Medical Center

I would like to make a gift in support of:	I would like to support the following area(s) of the Greatest Needs at Vanderbilt Health (U12 Greatest Needs at Children's Hospital Van Greatest Needs at Vanderbilt-Ingram Can Other An annual contribution of \$1,000 or more is recognized For gifts of \$25,000 and up, you will be contacted for ad	2341) \$ aderbilt (U00141) \$ cer Center (R05299) \$ with membership in the Canby Robinson Society. \$
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Ways to give:	 Check (<i>Make payable to Vanderbilt University Medical Center and designate gift in the memoline</i>) Credit Card: Visa MasterCard American Express Discover One-time Gift: \$ Monthly Recurring Gift: \$ Card Number: Exp. Date: Card Holder's Name: Card Holder's Signature: Stock Transfer (<i>Gift and Donor Services - (800) 288-0028 or DonorServices@vumc.org</i>) I have included Vanderbilt University Medical Center in my estate plans. 	
Your contact information:	Name:Spouse:Address:	
Don't forget to sign:	Signature (required):	
VANDERBILT UNIVERSITY MEDICAL CENTER Mail to: Vanderbilt University Medical Center Development		Thank you for your caring support of Vanderbilt University Medical Center. Every gift in every amount makes a difference.
PO Box 290369 Nashville, TN 37229-0369 Questions? (800) 288-0028 or DonorServices@vumc.org		າ ຫຼັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່ຈັງແມ່