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Menzies Institute for Medical Research
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In Memoriam Giving

This gift in memory of your loved one will assist the Menzies Institute for Medical Research in finding ways to prevent or cure diseases and save lives.

Thank you.

No stamp required
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 Three thick, vertical black bars of equal height and width, positioned to the right of the text.


In Memoriam Donation Thank you for making this gift in memory of your loved one.

We will send you an acknowledgement letter and tax deductible gift receipt as soon as your donation is processed.
A letter on your behalf will also be sent to the next of kin advising them of your gift.

In memory of:

Title: _____ First name: _____ Surname: _____

Nominated research area for donation (e.g. general research, heart disease, cancer, MS, dementia): _____

Your information:

Title: _____ First name: _____ Surname: _____

Address: _____ Suburb: _____ State: _____ Postcode: _____

Phone: _____ Email: _____

Is the donation on behalf of an organisation? Yes No Company/Club/Organisation name: _____

Do you wish to be acknowledged in Menzies publications? Yes No

Menzies does not sell, rent, share or disclose your personal details under any circumstances. For further information please access our privacy statement by visiting menzies.utas.edu.au/aboutus/privacypolicy or call 03 6226-7700 for further information or to request our Privacy Policy brochure.

Payment details (tick applicable boxes):

I would like to donate a gift of \$ _____ Please disclose the amount donated to next of kin: Yes No

My cheque/money order payable to **MENZIES INSTITUTE FOR MEDICAL RESEARCH** is enclosed **OR** please charge my credit card: Visa Mastercard

Card Number: Expiry Date: /

Cardholder's Name: _____ Signature: _____

If you would prefer to make your gift over the phone, please call our toll free number 1800 638 124. **All gifts \$2 and over are tax deductible.**

Next of kin (if known):

Title: _____ First name: _____ Surname: _____

Their relationship to deceased (e.g. brother, wife, friend, etc): _____

Address: _____ Suburb: _____ State: _____ Postcode: _____

Phone: _____ Email: _____

Your donation makes a difference by funding life-saving research. **Thank you.**