



# TSF Donation Form

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Payment Type** *(Please circle one)*

Amex

Visa

MasterCard

Discover

Check Enclosed

Card Holder Name \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Billing Address, Zip Code \_\_\_\_\_

**Contribution Amount:**                      \$1,500                      \$1,000                      \$500                      \$250                      Other \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*If you would like your donation to be a tribute gift, please complete the fields below.*

Gift is in honor of \_\_\_\_\_

Gift is in memory of \_\_\_\_\_

Send Acknowledgment to \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

All contributions to TSF are directed to TSF Research Awards, which is TSF's "Area of Greatest Need".  
However, donors have the option to select an alternative fund. Choices include:

- \_\_\_ Research Awards (Area of Greatest Need)
- \_\_\_ Alley-Sheridan Scholarships
- \_\_\_ Braunwald Research Awards
- \_\_\_ Carolyn E. Reed Traveling Fellowship
- \_\_\_ Michael J. Davidson Fellowship
- \_\_\_ Robert L. Replogle Traveling Fellowship
- \_\_\_ STS Research Award

TSF is a 501(c)(3) Illinois Not For Profit Corporation. Contributions made to TSF qualify as a charitable deduction for federal income tax purposes. Please consult with your tax adviser to determine the amount allowed by law.

No goods or services will be provided in exchange for your generous financial donation.

Return this form to:  
**The Thoracic Surgery Foundation**  
633 N. Saint Clair Street, Floor 23, Chicago, IL 60611  
P: 312.202.5868 | F: 773.289.0871 | tsf@sts.org