



DONATION FORM and CONTACT INFORMATION

Your contributions are vital to our mission as the American Porphyria Foundation is growing at an unprecedented rate and helping thousands of individuals impacted by Porphyria through research, awareness, advocacy and support. Porphyria is a rare disorder, and your donations are the sole source of support for the APF, enabling us to further educate and support porphyria patients and their doctors. The suggested annual tax-deductible donation for membership is \$35.00. All other donations are appreciated greatly!

Please enclose a check, or to make a credit card donation, please call the APF toll-free at 866-APF-3635, or print and fill out the form below and email it to general@porphyriafoundation.org or mail it to our address below. We accept Visa, MasterCard, and American Express.

Payment Method: **Check:** Check # _____ OR **Credit Card** (please fill out the information below)

Donation Amount: \$ _____ Thank You - The APF is sincerely grateful for your gift!

Card # _____ Exp: ____/____ CVV: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone # _____ Email _____

You can also make your donation in memory or honor of a loved one as a Gift of Remembrance.

Please make my donation **In Memory** of OR **In Honor** of: (please circle one)

Name: _____ Relationship: _____

Please notify the person and/or family below of my gift:

Name(s): _____

Email: _____

Address: _____

City: _____ State: _____ Zip _____

Please mail form to American Porphyria Foundation at 4502 Cortez Rd. W, Suite 102, Bradenton, FL 34210

Please provide your suggestions or comments here and on reverse side if you need more room: