

**BLOOMINGTON
MEALS
ON
WHEELS**

THANK YOU for helping us feed elderly and disabled homebound persons. Your gift will help expand existing programs and provide meals for those in need of financial assistance.

Bloomington MEALS ON WHEELS CONTRIBUTION FORM

(LAST) (FIRST) (MIDDLE INITIAL)
ADDRESS

(NUMBER & STREET) (APT. #)

STATE ZIP _____
E-MAIL
ADDRESS _____

Enclosed is my gift to Bloomington Meals on Wheels:

\$35 \$50 \$75 \$100 \$200 \$_____

Check # _____

Your gift is TAX DEDUCTIBLE.
Please make your check payable to:

Bloomington Meals on Wheels, Inc.
727 W. First St
Bloomington, IN 47403

Please send me more information on gift and estate planning