

Charitable Giving Form

The Department of Medicine

Center for Innovative Medicine Shelley Cooke, Executive Director of Development 5200 Eastern Avenue Mason F. Lord Building, Center Tower, Suite 314

Baltimore, MD 21224

www.hopkinsCIM.org | 202-657-3285 | scooke@jhmi.edu

| CASH GIFT | |
|---|---|
| Gift amount: \$ (Gifts are tax-deductible in accordance with the Internal Revenue Code.) | |
| ☐ I have enclosed a check for \$ (Please make your check payable to The Johns Hopkins University and indicate in the memo the specific physician or fund you wish to support.) | |
| ☐ I wish to make my gift by credit card: ☐VISA ☐MASTERCARD ☐AMEX ☐DISCOVER Card # Exp. Date Name on Card | |
| Name on Card Signature | • |
| I pledge \$ to be paid in amounts of \$/ (You will receive annual pledge reminders.) | over years. I will begin the pledge on |
| My company or my spouse's company will match my gift. | |
| GIFT DESIGNATION | RECOGNITION |
| Please designate my gift: | Donors may be recognized in publications. Please print |
| ☐ Where the need is greatest. | your name as you wish it to appear, including your preference for Mr., Mrs., Ms., Dr. <i>Please note if you wish to</i> |
| To support the work of Dr. (please be as specific as possible) | remain anonymous. |
| | Name |
| Other: | Address |
| | City State Zip Phone |
| | Zip Pnone |
| ADDITIONAL WAYS TO GIVE | |
| ☐ I am making my gift with appreciated securities. ☐ I have included the Johns Hopkins Center for Innovative Medicine in my will, a trust, or other financial plans. ☐ I would like information on how to include the Johns Hopkins Center for Innovative Medicine in my will. ☐ I would like to know more about gifts that provide income for life to me and/or another beneficiary. ☐ I would like information on tax benefits to me from gifts of: ☐ appreciated securities ☐ life insurance ☐ real estate ☐ antiques, artwork, or other personal property ☐ I would like to know more about ways of giving to the Johns Hopkins Center for Innovative Medicine. ☐ Please call me at this #: The best day and time to call is | |

MAIL THIS FORM TO:

The Department of Medicine **Shelley Cooke, Executive Director of Development** Johns Hopkins Bayview Medical Center Mason F. Lord Building, Center Tower, Suite 314 Baltimore, MD 21224

For more information about the Center for Innovative Medicine: www.hopkinsCIM.org

Gifts to Johns Hopkins Medicine are subject to the policies of the Institutions in place at the time of the gift. Therefore, a portion of this gift will be directed to the Clinical and Academic Fund as directed by the Board of Trustees of Johns Hopkins Medicine.

A copy of the current annual financial statement may be found at www.controller.jhu.edu/pubs/financial_reports/.