

KENDAL[®] at Granville

Together, transforming the experience of aging.[®]

Enclosed is my/our gift of \$ _____ to KENDAL AT GRANVILLE.

Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Email: _____

____ I am affiliated with a matching gift company. (Please include form.)

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: (____) _____ Email: _____

Please allocate my gift to the following:

____ Resident Assistance Fund ____ Unrestricted Fund

My gift is

____ In Memory of: _____

____ In Honor of: _____

____ On the Occasion of: _____

Please send acknowledgment to: _____

Please use my gift unrestricted _____ or for (specify purpose) _____

____ I have included _____ in my estate plans.
Specific Community/Affiliate or Kendal Charitable Funds

____ Please send me information on bequests and gifts that return lifetime income.

Please Make Check Payable to Kendal at Granville and Send Donation to:

Kendal at Granville

2158 Columbus Rd | Granville, OH 43023 | Attn: Philanthropy Office