

Thank you for making a gift to the Louisiana Association for the Blind.

This gift is in Honor of / Memory of _____

My Name is _____

Address _____

Home Phone _____

Enclosed is my gift of _____

Visa/MasterCard/American Express/Other

Card Number _____

Name on the Card _____ Expiration Date _____

Send notice card to:

Name _____

Address _____

This is a gift for a special occasion

Birthday Anniversary Get Well Wishes Other _____

I would like information on how to include the Louisiana Association for the Blind in my estate plans

Please mail checks and money orders to:

The Louisiana Association for the Blind
1750 Claiborne Avenue
Shreveport, LA 71103