



Before After 1 Year Later

Why We Do What We Do!



Individual Donor Form

YES, I want to Save Smiles and Change Lives!!

Here's what your donation can do:

- \$1000 funds up to four surgical procedures
- \$500 purchases disposable supplies for 125 children
- \$250 covers maintenance of instruments for three missions
- \$100 pays for anesthetic to treat four children
- \$50 covers one box of antibiotics

Enclosed is my tax-deductible donation:

_____ \$1000

_____ \$500

_____ \$250

_____ \$100

_____ \$50

_____ Other (all donations are appreciated)

.....
Name: _____

Rotary Club (if applicable): _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

Make check payable to:

District 7430 Foundation/Rotaplast

c/o Linda Young

1050 Sunset View Circle

Bethlehem, PA 18017

lryoung2011@gmail.com

610-392-6864

Thank you for helping children smile!