



The Sight Center
of northwest ohio

Confidential Reply Card

Please print and mail to:
Development Director
The Sight Center of Northwest Ohio
1002 Garden Lake Parkway
Toledo, OH 43614

If you have kindly included The Sight Center of Northwest Ohio
In your Will, please take a moment to let us know. Additionally,
If you would like to know about other ways to make planned gifts,
Please complete and return this form.

_____ I have included The Sight Center in my Will

___ Please list my name as follows in your Legacy recognition

___ Please list my name as "Anonymous" in your Legacy recognition

___ Please send me information on how to include The Sight Center in my Will

___ Please send me information on making gifts of cash, insurance, stocks,
bonds, mutual funds, or real estate.

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (home) _____ (work) _____

Email _____