

MAIL-IN DONATION FORM

To make a donation by mail, please type or clearly print your information into this form, print it out and send with a check payable to the **Look Good Feel Better Foundation**:

Look Good Feel Better Foundation 1620 L Street NW, Ste. 1200 Washington, DC 20036

Your generosity will help us restore hope and confidence to individuals in cancer treatment. Thank you!

DONOR INFORMATION	
First Name:	Last Name:
Company/Organization (if applica	ble):
Address Line 1:	
Address Line 2:	
City/State/Zip:	Primary Phone:
Email:	
GIFT INFORMATION	
Enclosed is my check in the amou	nt of \$
This donation is (select one):	
General Donation	
☐ In Honor of:	(Name of individual)
	(Name of deceased)
	letter to someone as notification of your honorary or memorial donation, ormation below. Your gift amount will not be included in the letter.
Name:	
Address:	
City/State/Zip:	
SIGN UP	
Check here to receive regula	ar email updates from Look Good Feel Better.