

YOUR SUPPORT CAN MAKE A CHILD SMILE
It costs about \$180 to provide dental care
to one child for one year.



PLACE
STAMP
HERE

American Friends of Dental Volunteers for Israel
P.O. Box 127
New York, NY 10185



American Friends of Dental Volunteers for Israel

in support of

The Trudi Birger Dental Clinic
Jerusalem • Israel

E-mail: americanfriendsofdvi@gmail.com



*There is no finer or more meaningful recognition than a gift that offers health and hope to others.
Your generosity is greatly appreciated by the children who are treated at the clinic.*

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

My gift to American Friends of DVI: \$ _____ (Please make check payable to American Friends of DVI or complete credit card information below.)

Membership: Please auto-charge my credit card for yearly membership to help support a child's care. \$180.00 Other \$ _____

Visa

Mastercard

American Express

Discover

Card Number _____ EXP _____ Signature _____

My gift is:

in tribute

a memorial

in recognition of services rendered

other (please describe) _____

Please send notice of this gift to:

Name _____

Address _____ City _____ State _____ Zip _____

Your gift is deductible to the fullest extent permitted by law. American Friends of DVI is a 501 (C)3 charitable organization.