

# Western District Health Service

I would like to make a donation to  
Western District Health Service

My Cheque Enclosed is made out to Western District Health Service  
and is for \$\_\_\_\_\_

OR

Please deduct an amount of \$\_\_\_\_\_ from my credit card  
The details are as follows:

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Card Number: \_\_\_\_\_

Card Type: \_\_\_\_\_

Expiry date on Card: \_\_\_\_\_

Last three numbers on back of card: \_\_\_\_\_

.....

Donor's name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

PLEASE FORWARD YOUR DONATION TO:

Community Liaison Department  
Western District Health Service  
PO Box 283  
Hamilton Vic 3300

OR  
Email to: [ceo@wdhs.net](mailto:ceo@wdhs.net)

OR  
Fax to: 5551 8229

I would like my donation to go towards:

- WDHS Equipment Purchases**
- Coleraine District Health Service Redevelopment**
- Penshurst & District Health Service Aged Care Service Upgrade**
- Other areas (Please specify) \_\_\_\_\_**

**ALL DONATIONS OVER \$2 ARE TAX DEDUCTIBLE!**