

WALK for CHILDREN'S

Presented by UPMC

UPMC HEALTH PLAN

Please attach a deposit slip to EACH gift of cash or check and mail to:

ATTN: Walk for Children's
Children's Hospital of Pittsburgh Foundation
PO Box 535240
Pittsburgh, PA 15253

Download additional deposit slips at
walkforchildrens.com

GIFT DEPOSIT SLIP

Walker Name: _____

Donor Name: _____

Donor Address: _____

Donor Phone: _____

Donor Email: _____

- Check
 Cash

Gift Amount: _____



Children's
Hospital of Pittsburgh

FOUNDATION

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