

Lanakila Meals on Wheels *and more!*



## Printable Donation Form

Your gift to Lanakila Meals on Wheels will provide much needed meals and support for seniors. We are part of Lanakila Rehabilitation Center, Inc., dba Lanakila Pacific, a 501(c)3 non-profit organization. A portion of each donation is tax deductible to the full extent allowable by law. A welcome packet will be sent to you including your table tickets, information on your restaurant, and information on how to participate as we dine together and share in real time.

### Donations may be made payable/sent to:

Lanakila Meals on Wheels  
1809 Bachelot Street  
Honolulu, Hawaii 96817

Federal Tax I.D. No.: 99-0103922

**Fax: 808-533-7264**

**Donations may also be made by calling (808) 531-0555**

### YES! I'd like to participate in The Good Table by...

- Purchasing a table/entering the drawing to be paired with a restaurant in my chosen category.
- Buying a particular table now in the following restaurant/category.

Restaurant pick: \_\_\_\_\_

Restaurant Category (please check category and amount)	Table Purchase Amount for Drawing	Buy Now Amount for Your Choice of Restaurant
<input type="checkbox"/> Hale Aina Table for six	<input type="checkbox"/> \$2,500	N/A
<input type="checkbox"/> Orchid Table for six	<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$1,800
<input type="checkbox"/> Hibiscus Table for six	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1,350
<input type="checkbox"/> Pikake Seats for two	<input type="checkbox"/> \$500	N/A
<input type="checkbox"/> Ginger Table for four	<input type="checkbox"/> \$500	<input type="checkbox"/> \$750
<input type="checkbox"/> Plumeria Table for four	<input type="checkbox"/> \$200	<input type="checkbox"/> \$300
<input type="checkbox"/> I'm unable to dine out, but I'd like to contribute \$		

Name: \_\_\_\_\_ Company: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

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

### If donating by credit card, please provide the following information:

Visa: \_\_\_\_\_ Mastercard: \_\_\_\_\_ AMEX: \_\_\_\_\_ Discover: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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

**Please fax to (808) 533-7264 or mail to: Lanakila Pacific, 1809 Bachelot Street, Honolulu, Hawaii 96817**

For more information, please contact us at 531-0555.

**Mahalo for supporting Hawaii's Kupuna!**