

PWS Donation Form

Thank you for making a donation! All proceeds will go to a PWS fund at KU Medical Center towards research in hopes of one day finding a cure. Please fill out the information below and attach it to your check. Thanks again for your support!

Name: _____ Phone Number: _____

Address: _____

Donation Amount: \$_____ Check Number: _____

***Please make checks payable to: **The KU Endowment** (and under the memo section, please put "PWS Fund").*

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