



**KAIROS of SOUTH CAROLINA
MEMORIAL GIFT FORM**

Date: _____

Doner as you wish it to appear on the Acknowledgement:
Name: _____
Address: _____

In Memory of: _____

In Honor of: _____

Acknowledgement Sent To:
Name: _____
Address: _____

Amount of Gift : _____

Please mail contribution with this form to:

Kairos of South Carolina
PO Box 6211
Columbia, SC 29260