

Enclosed is my donation of \$ _____ payable to **Deaf & Hearing Interpreting Services, Inc.**

Please use it for:

Interpreting Services

Work at Bloomfield Hills Nursing Home

Satellite Sites

Outreach Services

Any

Name _____

Address _____

City, State, Zip _____

Please mail to: **DHIS, 25882 Orchard Lake Road, Suite 100, Farmington Hills, MI 48336**