



Healthcare Professional Donor Incentive Flyer **Breastfeeding: The Baby Friendly Way**

Show your support for nature's perfect food and win a copy of *Medications and Mothers' Milk*!

(Name)

(Address)

(Amount)

(La Leche League representative signature)

\$300 Name listed in *New Beginnings*

\$500 Name listed in *New Beginnings* plus receive *Medications and Mothers' Milk* (value \$35)

Not-for-profit 501(c)(3) organization—donations are tax deductible less the value of any goods provided.
No other goods or services were provided the donor in exchange for contributions.

(Detach Here)

Send this form to: **Pam Dunne, WBW Registrar, 7295 Highland Estates Place, Falls Church, VA 22043**

\$300 donor - List name in *New Beginnings*

\$500 donor - List name in *New Beginnings* plus receive *Medications and Mother's Milk* (value \$35)

I wish my entire \$500 to be a contribution; do not send me *Medications and Mother's Milk*

List the donor's name as given below and send the incentives to:

(Name)

(Address)

(PRINT name and email address of La Leche League representative)

Thank you for your tax-deductible donation!