

Dear [Donor's Name],

Thank you for your generous commitment to supporting [Children's Hospital Name]. Your choice to contribute on a monthly basis truly makes a difference in the lives of the children and families we serve.

Your monthly gift of [amount] will help us provide essential medical care, state-of-the-art equipment, and support programs that ensure a brighter future for our patients.

Here's how your contribution will directly impact our hospital:

- Access to necessary treatments and surgeries
- Programs that support families during difficult times
- Research and innovation to improve pediatric care

We are deeply grateful for your commitment. Together, we are creating healthier futures for children. You will receive regular updates about our programs and how your contributions are making a significant impact.

If you have any questions regarding your monthly giving or wish to adjust your commitment, please feel free to contact us at [contact information].

Thank you once again for being a vital part of our mission!

Sincerely,
[Your Name]
[Your Title]
[Children's Hospital Name]