

# Giving to Cancer Patient Services



Your donation to Cancer Patient Services will help us provide vital services and programs to Hancock County cancer patients. We provide financial, physical, educational and emotional support to clients and their caregivers.

## ***Donation Opportunities:***

### **In Honor of:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **In Memory of:**

Name: \_\_\_\_\_

*Send Acknowledgement to (if you would like it sent to someone other than yourself):*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **General Donation**

Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Enclosed is my check for: \$ \_\_\_\_\_

Please make all checks payable to **Cancer Patient Services** or

Please bill my:  Visa  MasterCard  Discover  American Express

Name on Card: \_\_\_\_\_

Account #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

All Contributions are tax deductible to the extent allowed by current law.

Please mail completed form with check or credit card information to:

Cancer Patient Services  
1800 N. Blanchard St. Suite 120 Findlay, OH 45840