

Yes! I want to help Cancer Services.

- \$1,000
- \$500
- \$250
- \$100
- Gift from the Heart \_\_\_\_\_



Donor's

Name(s): \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

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

- Master Card
- Visa

Card number: \_\_\_\_\_ Expires: \_\_\_\_\_

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

Your contribution is tax deductible to the fullest extent of the law and will be gratefully acknowledged.  
Please make your checks payable to Cancer Services of Northeast Indiana.

Please designate my donation in memory of \_\_\_\_\_

Please designate my donation in honor of \_\_\_\_\_

and notify: Name: \_\_\_\_\_ of this contribution.

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

100% of all contributions made to Cancer Services are spent in our community, helping local residents who have been diagnosed with cancer, their families and the community.

Please mail to: Cancer Services of Northeast Indiana  
6316 Mutual Drive  
Fort Wayne, IN 46825