



YES! As CSCP celebrates 27 years of service, I want to make a gift to help expand its programs and reach more people challenged by cancer!

Gift Amount: \$1,500 \$750* \$500 \$250 \$100 \$70 \$40 Other _____

*This gift amount underwrites the annual cost of services for one member.

I prefer to remain anonymous.

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Phone # _____ Email: _____

My gift is in Honor of My gift is in Memory of Please send an acknowledgment letter on my behalf to:

Name: _____

Name: _____

Occasion: _____

Address: _____

City: _____ State: _____ Zip: _____

(The amount of your gift will not be mentioned.)

My check, made payable to Cancer Support Community Pasadena, is enclosed.

Please charge my credit card as indicated: Visa MC Amex Discover

Name on Card: _____

Credit Card No.: _____ Exp. Date: _____ Sec Code: _____

Please mail this completed form to Cancer Support Community Pasadena, 76 E. Del Mark Blvd., Ste. 215, Pasadena, CA 91105. You may also donate online at www.cscpasadena.org.

THANK YOU!