

**Freeman Health System
Cornell-Beshore Cancer Institute Recognition**



Enclosed is our tax-deductible contribution in the amount of \$_____ to help support Freeman Health System Cornell-Beshore Cancer Institute.

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Email _____

Please acknowledge this gift with:

- Star (Please circle level) \$150 - Copper \$250 – Zinc (silver) \$500 – Brass (gold)
- Paver - \$100

Please make checks payable to: FREEMAN DEVELOPMENT OFFICE
931 East 32nd Street, Suite 3
Joplin, MO 64804

Form and payment may be dropped off at the Freeman Development Office or sent by mail, c/o Jayde Thomas, Donor Relations Specialist.

A gift to Freeman Development Office for Cornell-Beshore Cancer Institute offers a wonderful opportunity for a thoughtful tribute *in memory of* or *in honor of* a family member, friend or associate.

- In memory of _____
- In honor of _____

Please send an acknowledgement of this gift to:

Name _____

Address _____

City _____ State _____ Zip _____

All *in honor of* or *in memory of* gifts are acknowledged promptly with a card to the family or the person honored. The amount of the gift is not mentioned.