

Please mail this form and your check to: **American Cancer Society** PO Box 6704 Hagerstown, MD 21741

(Please PRINT all information clearly.)
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Date:	
Enclosed is my check in the amount of \$	payable to the American Cancer Society.
Donor name:	
Address:	Phone:
City/State/Zip:	
Type of Donation	
General Donation	
Event Donation	
Event Name:	
City:	State:
Staff Partner Name:	
□ Gift in memory of:	(name of deceased)
Gift in honor of:	(name of individual)
Send Memorial/Honor Card to:	
Card Recipient Name:	
Address:	
City/State/Zip:	
How would you like the card to be signed?	
	(name or names)
	matched gift! Check with your company to see if it rogram – some may even match gifts made by

## We thank you for your support!

Your contribution is tax-deductible. To reduce administrative costs, your gift will be processed at a central facility.

The American Cancer Society cares about and protects your privacy. The information you provide to the American Cancer Society will only be used as described in our privacy policy, cancer.org/about-us/policies/privacy-statement.html.

retirees and/or spouses. Visit cancer.org/matching for more information.

If you have any questions, please call us at 1-800-227-2345.