



Make a Gift to Cancer Support Community

Please mail this form, along with your donation, to: **Cancer Support Community**
1050 17th Street NW, Suite 500
Washington, DC 20036

If your employer has a matching gift program, please also include the appropriate form. Thank you.

Your gift in any amount is vital to our mission: *to ensure that all people impacted by cancer are empowered by knowledge, strengthened by action, and sustained by community.*

Gift Information

I am delighted to join the friends of the Cancer Support Community to help ensure that no one faces cancer alone.

My tax deductible gift of \$_____ is enclosed via a check payable to Cancer Support Community, or please charge to my credit card:

() MC () AMEX () VISA (select one)

Card Number _____ Expiration Date _____

Name on Card _____ Signature _____

Donor Information

Name _____

Street Address _____ Apartment/Suite _____

City _____ State _____ Zip _____ Country _____

Home Phone _____ Work/Cell Phone _____

E-mail _____

Gift Dedication (Optional)

My gift is () In Honor of () In Memory of (enter name) _____

Special Dedication (e.g. any personal notes you wish to be included, or additional donors to be listed):

Please send notification of my gift to:

Name _____

Street Address _____ Apartment/Suite _____

City _____ State _____ Zip _____ Country _____

E-mail _____