

Saving lives with your support.



Thank you for your donation supporting groundbreaking cancer research and compassionate patient care programs at Roswell Park Cancer Institute.

Please mail this completed donation form with your gift to the address below:

Roswell Park Alliance Foundation
Elm & Carlton Streets
Buffalo, NY 14263

You can also fax the form to: 716-845-1478

Yes, I want to help RPCI save lives and make more discoveries that will offer hope to cancer patients. I support these efforts with my gift of:

- \$35
- \$50
- \$100
- \$500
- Other \$ _____

* You might be able to double your donation by applying for matching funds from your employer. Call your Human Resources Office to find out if your donation is eligible!

Enclosed is my check payable to **Roswell Park Alliance Foundation**, or please charge my credit card:

- Visa
- MasterCard
- American Express

Name _____

Telephone _____

E-mail _____

Street Address _____

City, State Zip _____

Signature _____

Card Number _____

Expiration date _____

Do you wish to make a gift in memory or honor of a friend or relative?

The Roswell Park Alliance Foundation will promptly acknowledge your gift and notify those you so designate.

In memory of: _____

In honor of: _____

Please send acknowledgement to:

Name _____

Street Address _____

City, State Zip _____

Please send me information on Wills and Life Income gifts.

For other Giving Opportunities, call **716-845-4444** or visit www.roswellparkfoundation.org