



Christmas Tribute for the Cancer Patient Benevolence Fund

<p>Contributor Name: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____ Phone: _____</p> <p>Please Notify: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____ Phone: _____</p> <p>Donations are tax deductible. Suggested donation: \$10 per ornament. Make checks payable to: Cancer Patient Benevolence Fund. Mail donation to: Anderson Regional Cancer Center, 1704 23rd Avenue, Meridian, MS 39301 or drop by.</p>	<p>Yes, please do a Christmas Tribute ornament(s) for:</p> <p>_____</p> <p><input type="checkbox"/> In honor of <input type="checkbox"/> In memory of</p> <p>_____</p> <p><input type="checkbox"/> In honor of <input type="checkbox"/> In memory of</p> <p>_____</p> <p><input type="checkbox"/> In honor of <input type="checkbox"/> In memory of</p> <p><input type="checkbox"/> I will be present to hang my ornament</p> <p><input type="checkbox"/> I will be unable to attend; please hang my ornament in advance</p> <p>Total donation enclosed: \$ _____</p>
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