



☐ It is not necessary to acknowledge this gift

The month of May is the perfect time to remember those we love. We invite you to celebrate the memory of someone close to you, honor someone living, pay tribute to those serving in our military or mark a special occasion by having their names listed in our special memorial/honorarium Fall edition of Journey, Hospice of Butler & Warren Counties' newsletter. (Individuals listed need not have been patients in the Hospice of Butler & Warren Counties' program.)

Your generous gift will help provide care to patients facing life-threatening illnesses in our area and their families. Names must be submitted by June 8, 2013 for inclusion in the newsletter.

| Name of person being ☐ honored or ☐ memorialized as it should appear: | Gift Amount: ☐ \$30 |) □\$60 □\$100 □ Other \$ |
|---|--|---|
| | | to: Hospice of Butler & Warren Counties |
| My Name: | Please charge my credit card: | |
| | ☐ Mastercard ☐ VISA ☐ Discover ☐ American Express | |
| Address: | | |
| | Account # | |
| City/Sate/Zip: | Exp. Date | 3-Digit Code |
| ☐ Do not print name being remembered/honored | Signature | |
| Please do not print donor(s) name | If you wish to be removed from any mailing list places | |