

*Sample inscriptions
for leaves, stones, and acorns*

*In Gratitude For The
Blessings Bestowed On Our Family*

Lance & Linda Evans

*In Honor Of The Birth Of
Anna Marie Smith
September 14, 1991
Mom, Dad, and Casey*

*In Loving Memory Of
John D. Murray*

*Ken, Janice, and Elaine
Murray*

*Your inscription is limited by the number of characters
that will fit on the donor sponsored item, ranging from
86 to 131 characters.*

Print or type your desired inscription:

***The Foundation appreciates your
support of the "Tree of Hope."***

**PERRY
MEMORIAL HOSPITAL
FOUNDATION**

_____ I accept your invitation to
participate in the Perry Memorial
Hospital *Tree of Hope* program.
Please accept my contribution to the
Foundation as indicated below:

_____	\$ 100.00	Copper Leaf
_____	\$ 250.00	Brass Leaf
_____	\$1000.00	Donor Stone
_____	\$2000.00	Golden Acorn

_____ I would like more information
about the Perry Memorial Hospital
Foundation and the *Tree of Hope*.

All donations are tax deductible. Please make
checks payable to:
Perry Memorial Hospital Foundation

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

*Please fill out the information, tape or staple the
form with your donation, and bring by the hospital
or drop in the mail. The postage is paid! Thank
you for your support!*

*Please plant your "seed money"
today!*