MAKE A DONATION

EVERY GIFT, EVERY DONOR MATTERS



Your gift to your community hospital has an immediate impact on our patients and colleagues.

Thanks to the support of donors like you, Mercy Fitzgerald Hospital, Nazareth Hospital, Saint Francis Hospital and St. Mary Medical Center can provide excellent and compassionate care to everyone who enters our doors.

Gifts to the Philanthropy Departments of Mercy Fitzgerald Hospital, Nazareth Hospital, Saint Francis Hospital, and St. Mary Medical Center enable you to be a part of our healing ministry and help us continue the legacy of our founders, to provide high-quality services and programs to the less fortunate, uninsured and underinsured populations.

My/our gift of:			
□ \$500 – \$1,000	□ \$249 – \$499	□ \$5 – \$249	Other \$
My gift is designated	to:		
☐ Community Healt	h & Well-Being	☐ Colleague Assistanc	e Greatest Capital Needs
Name:			
Address:			
City:		State:	Zip:
If this is a tribute do	nation, please inc	lude the following: 🗆 In	honor of \Box In memory of
Circt None or		Last Nassas	

Please mail this form along with your check made payable to the appropriate hospital to one of the following locations:

Mercy Fitzgerald Hospital and Saint Francis Hospital Office of Philanthropy 701 North Clayton Street Wilmington, DE 19805

Nazareth Hospital and St. Mary Medical Center Office of Philanthropy 1207 Langhorne-Newtown Road The Sister Clare Carty Conference Center Langhorne, PA 19047 If you would like a letter mailed on your behalf, please include the following:

Name:		
Address:		
City:		
State:	7in:	

