

## My Response

I am pleased to inform you that I/we should be included as members of the Galen Legacy Society.

I have included a planned gift for the Cancer Prevention Institute in the following way:

- |   |  |
|---|--|
| <input type="checkbox"/> Bequest          | <input type="checkbox"/> Gift Annuity  |
| <input type="checkbox"/> Insurance        | <input type="checkbox"/> Outright Gift |
| <input type="checkbox"/> Retirement Fund  | <input type="checkbox"/> Other Gift    |
| <input type="checkbox"/> Charitable Trust |  |

Name (s) \_\_\_\_\_

- Please send me more information on how I can become a member of the Galen Legacy Society.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Please return to:



Attention: Barbra Stonerock  
Cancer Prevention Institute  
4100 S. Kettering Blvd.  
Dayton, OH 45439