



Loving Hearts Caring Hands Dinner

benefitting The University of Texas M. D. Anderson Cancer Center
Department of Chaplaincy and Pastoral Education

Thursday, April 30, 2009 • The Houstonian Hotel • 111 North Post Oak Lane • Houston, TX 77024

Printed materials should list my contribution as follows:

Company and/or Individual Name _____

Mailing Address _____

City, State and Zip Code _____

Phone _____ Fax _____ e-mail _____

Please reserve the following (indicate number):

<u>Tables of 10</u>	<u>Individual Ticket Price</u>
_____ Major Underwriter \$25,000	_____ \$2,500
_____ Underwriter \$10,000	_____ \$1,000
_____ Benefactor \$5,000	_____ \$500
_____ Patron \$2,500	_____ \$250

Please charge my account with: Master Card Visa American Express

Card Number _____ Expiration Date _____

Signature _____

- I/we have listed my/our guest and their address on the reverse side.
- I would like to host a chaplain and spouse at my table.
- I cannot attend, however, enclosed is my contribution in the amount of _____
- This gift is given: in memory of: in honor of:

(please print)

Gift acknowledgement should be sent to:

Name _____

Address _____ City _____ State _____ Zip _____

Make check payable to Loving Hearts Caring Hands. IRS Tax I.D. # 741717686

RSVP before March 27, 2009 to be included in the Program. For more information call 713-862-8482. Please return this form by fax to 281-897-0467, gkoenning@chaplaincyfund.org, or mail to:

Gloria Koenning, Treasurer
Loving Hearts Caring Hands Dinner
P.O. Box 691284
Houston, TX 77269-1284