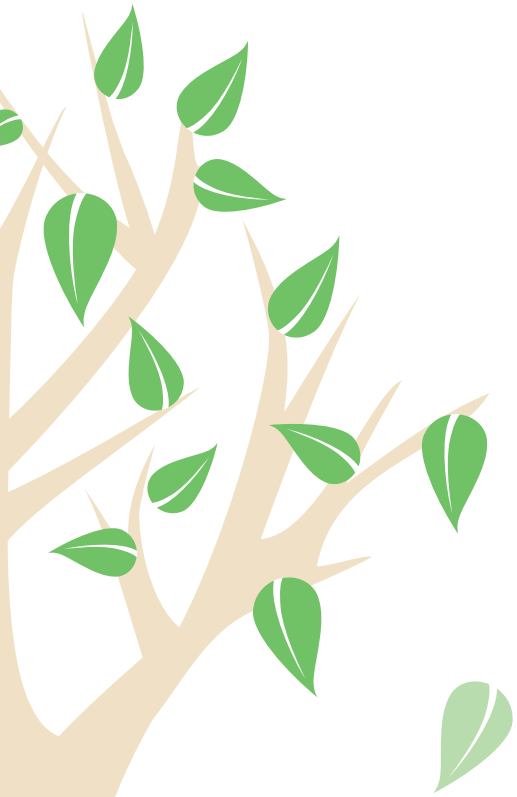

At the Marion L. Shepard Cancer Center, we diagnose and treat a variety of blood disorders and cancers as well as offer supportive services and continuing care for cancer survivors. We currently see over 1,400 patients per year from a 15-county region of eastern North Carolina. We have seen steady growth in the number of patients since we opened our doors in 2006 and anticipate a growing need for cancer services over the next 10 years.

Mission

The mission of the Shepard Cancer Foundation is to financially support and promote the Marion L. Shepard Cancer Center in its efforts to improve the mind, body and spirit of cancer patients, survivors and caregivers.

Shepard Cancer Foundation
1209 Brown Street
Washington, NC 27889

marionlshepardcancercenter.org

Shepard Cancer Foundation

Opportunities for Giving

Raising hope for today, with plans for tomorrow.

Shepard Cancer Foundation

Marion L. Shepard Cancer Center

For over 20 years members of our community stricken with cancer have sought treatment and care from the Marion L. Shepard Cancer Center. Person by person, family by family, we have cared for the medical and emotional needs of our patients and their families.

Our focus at the Cancer Center is not only on the treatment of cancer, but also improving the everyday lives of our patients and their caregivers. Our goal is to show compassion and provide hope as they embark on this journey. Some of the ways we accomplish this are by offering support groups, complementary therapies and educational programs designed to help them cope with both the physical and emotional challenges associated with having cancer.

The Shepard Cancer Foundation plays a vital role in support of our Center. The Foundation has been instrumental in raising funds to allow us to offer our educational programs, support groups and complementary therapies free of charge to our patients and their families. The Foundation also provides support for our patients who may have become financially burdened by their cancer diagnosis.

With your support of the Shepard Cancer Foundation, the Cancer Center can continue to provide these programs as well as others to help our patients and their families deal with the impact that cancer has on their lives. We are delighted that you are considering a contribution to the Shepard Cancer Foundation. There are several different areas to which you may give.

Cancer Center General Fund

Undesignated gifts made to the Shepard Cancer Foundation provide the resources needed to respond to the Cancer Center's most pressing needs.

Complementary Therapy, Support Groups and Educational Program Fund

Contributions made to this fund help us continue to offer a variety of programs designed to help patients and caregivers deal with the anxiety and stress associated with a cancer diagnosis as well as help improve their overall well being. We offer support groups for patients, survivors and caregivers. In addition, we provide several complementary therapies including massage therapy, yoga, art therapy, and a Pet Partners program. We also provide dietary counseling and educational sessions that help our patients better understand and manage their cancer diagnosis. These programs are free thanks to the wonderful support of our Shepard Cancer Foundation.

Patient Assistance Fund

Cancer treatment and associated expenses can be a financial strain and many times patients are in need of emergency aid for medication, utility bills, food and other expenses. Donations made to this program assist our cancer patients with these types of expenses.

Shaggin' for a Cause

An annual fundraiser organized by the staff of the Cancer Center to raise money for our patients.

On behalf of the staff of The Marion L. Shepard Cancer Center thank you for your continued support. Your generous contribution allows us to provide special programs and financial assistance to our patients and their families.

Donor Form

Please check the program(s) you would like to designate your contribution to:

- ◯ General Fund
- ◯ Complementary Therapy, Support Groups and Educational Program Fund
- ◯ Patient Assistance Fund

_____
Donor Name (please print)

_____
Address

_____
City, State, Zip

_____
Phone/E-mail

For contributions in tribute to someone please complete the following. For multiple acknowledgements, attach separate forms.

_____ In memory of _____ In honor of

_____
Name of person being honored or memorialized (please print)

_____
Name of person to be notified

_____
Address

_____
City, State, Zip

Enclosed is $_____

Please make checks payable to:
Shepard Cancer Foundation
1209 Brown Street
Washington, NC 27889