

"If you know me, you know that I am not satisfied by the status quo. I want to give women the ability to feel comfortable with options and innovative approaches to prevent and treat breast cancer that are more effective and less toxic."

Dr. Laura Esserman

MEMORANDUM OF SUPPORT

Yes, I want to give hope for the holidays. Please use my gift to connect the right

RE: MY SPECIAL YEAR-END GIFT

patient to the right drug at the right time using s collaboration. Here is my tax-deductible gift of	
\$50 \$100 \$250 \$5	\$1,000 \$5,000
Other \$	
I would like more information about in	cluding QLHC in my planned giving.
Please contact me as I would like to ma	ake a gift of stock.
Name	
Address	
City	StateZip
Phone Number Email	
Donate via credit card below or via check maile Collaborative, 499 Illinois Ave, Suite 200, Sa	
You can also donate online at www.quantumlea	aphealth.org/donate.
Credit Card (circle) VISA MC Amex S	Signature
Name on Card	Amount \$

Thank you for supporting Quantum Leap Healthcare Collaborative!