



### Giving HOPE will help:

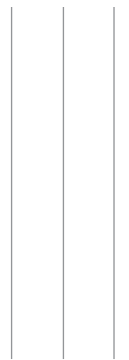
- Advance and support mental health care treatment
- Fund current programs and services
- Support innovative clinical education programs
- Underwrite the cost of new equipment and technology; and build new facilities for the health care needs of our community

When you give financially, you recognize and celebrate the excellence of care you or a loved one received at Lindner Center of HOPE, and in turn, helping others receive outstanding treatment.

The promise of HOPE for those who suffer with mental illness is at the heart of our mission at Lindner Center of HOPE.



Lindner Center of HOPE  
 Development Office  
 4075 Old Western Row Rd.  
 Mason, OH 45040



PLACE  
 STAMP  
 HERE

## Grateful Patients Sharing Stories of HOPE

S H E R R Y



*“Lindner Center of HOPE is not like any place I have ever been before; it is a safe place to land. A place where I was treated with respect and the staff supported me.”*

G R E G



*“I spent many nights on my knees and in tears asking God to lead me to the right place to get real help. I found Lindner Center of HOPE.”*

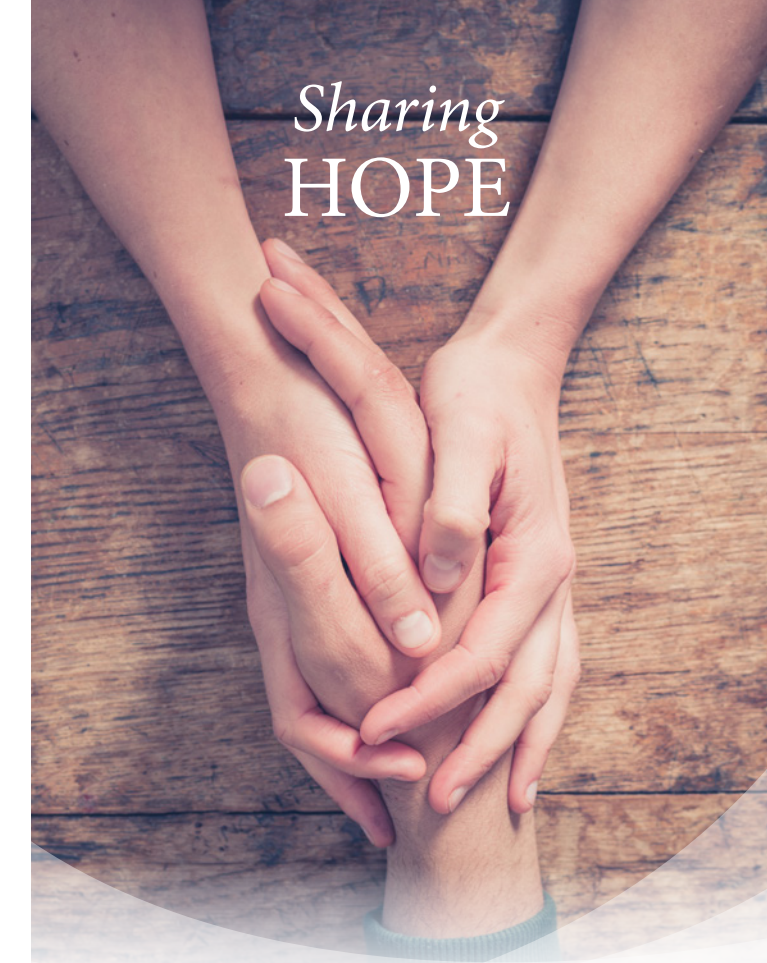
D O R E E N



*“A treatment plan was created for me. The combination of medication and ECT brought me back to life again.”*

Read complete stories:  
[lindnercenterofhope.org/donate](http://lindnercenterofhope.org/donate)

Lindner Center of HOPE |  Health™



# Sharing HOPE

*Sharing Stories of HOPE*  
*Sharing Gifts of HOPE*

Through  
 Lindner Center of HOPE's  
 Grateful Patient and Family Program

Lindner Center of HOPE |  Health™

## *A Way to Say Thank You and Give HOPE to Others*

Please tell us about your personal experience as a patient or donor at Lindner Center of HOPE. By sharing your story with us, you will help us tell others about how Lindner Center of HOPE provides life-changing treatment for people living with mental illness.

Perhaps it was a compassionate psychiatrist or therapist who gave you HOPE by recognizing your fears, or one of the many skilled technicians who shared an understanding word during group therapy. Sometimes a friendly smile from a staff member may have eased your fears and made you feel respected.

**There are hundreds of ways the employees at Lindner Center of HOPE make a difference in the lives of our patients.** We hear about them every day - through letters, phone calls and other expressions of gratitude. We enjoy hearing about your experiences and what may have given you HOPE.

**Sharing Stories of HOPE** and **Sharing Gifts of HOPE** allows you, your family, and friends to formally recognize the exceptional care received at Lindner Center of HOPE. Whether you choose to honor a particular specialist, nurse, entire unit, or a clinical program that impacted your health or that of a loved one, your gift is a meaningful opportunity to say "thank you", and to give back HOPE to those who may have given so much HOPE to you.

We may contact you to ask your permission to share your story of HOPE on our website, or in various other communications.

## *Sharing My Story Of HOPE!*

**Your comments help us provide better treatment, become better clinicians, and give our patients the best possible outcomes.**

Lindner Center of HOPE would like to publish your comments on our website, in newsletters, and other marketing materials to promote the Center's programs and services. You can remain anonymous if you wish.

**Sharing your story, gives HOPE to those seeking help.**

Send your story to: [mary.alexander@lindnercenter.org](mailto:mary.alexander@lindnercenter.org)  
Or use the space provided below and send to:  
Lindner Center of HOPE  
Development Office  
4075 Old Western Row Road, Mason, OH 45040

Lindner Center of HOPE will use first names only. If you wish to remain anonymous, please let us know.

**Thank you!**

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## *Sharing My Gift Of HOPE!*

Enclosed is my gift of \$ \_\_\_\_\_ payable to  
Lindner Center of HOPE

Please direct my gift where it's needed most.

Please direct my gift to \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Consider making a gift in honor of a physician, therapist, nurse, caregiver, or staff member who may have made a difference to you.**

I would like my gift to recognize/honor:

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Credit card gifts may be made online:  
**[lindnercenterofhope.org/donate](https://lindnercenterofhope.org/donate)**

Or call: **513-536-0328**

**Thank you!**

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