

This gift is made in memory or honor of someone:

In memory of _____

To honor _____

For (occasion, if applicable) _____

Please notify (name) _____

Relationship _____

Address _____

City/State/Zip _____

Phone _____

(An acknowledgement of the gift will be sent to whomever you designate; no amount will be mentioned.)

Friends of
Western Missouri
MEDICAL CENTER
P.O. Box 665
Warrensburg, MO 64093

First-Class
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without proper
postage

You can make a difference.

Your charitable contribution will help enhance the lives of the people served by Western Missouri Medical Center.

Thank you for your generous donation.

Legal Considerations

Friends of WMMC is certified as a 501(c)(3) not-for-profit tax exempt support organization by the United States Internal Revenue Service.

Checks, securities, deeds, bequests, and other legal documents should be made payable or transferable to:

Friends of Western Missouri Medical Center
P.O. Box 665
Warrensburg, MO 64093

All gifts are tax deductible to the full extent allowed by law.

For more information, please contact:
Charles Beebe
President of the Board
Friends of Western Missouri Medical Center
Phone: (660) 653-4726

Friends of
Western Missouri
MEDICAL CENTER

Charles Beebe, President
Molly Hout, Treasurer
Valerie Whiteman, Secretary
Betty Brenner
CL Holdren
Towanda Lawler
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Friends of
Western Missouri
MEDICAL CENTER

Providing support since 1987



A HISTORY OF SUPPORT

Formed on October 10, 1987, the Friends of Western Missouri Medical Center (WMMC) created its mission with the purpose of providing financial support and assistance in developing the facilities of Western Missouri Medical Center and services for its patients.

The Friends of WMMC operate in support of Western Missouri Medical Center's mission—to improve the health of the greater community by providing quality healthcare services, exceeding the expectations of those served.

A COMMITMENT TO PROVIDING QUALITY CARE

Western Missouri Medical Center (WMMC) is a fully accredited acute care facility located in Warrensburg, Missouri. A not-for-profit county healthcare system, WMMC offers comprehensive healthcare services to people throughout Johnson County and west central Missouri.

WMMC prides itself in obstetrics, orthopedics, outpatient clinics, ambulatory care, rehabilitation services and emergency care. Inpatient services include medical, surgical, intensive, obstetrical, orthopedic, pediatric and skilled nursing care as well as a wide range of therapeutic and diagnostic outpatient services.

WMMC is consistently expanding its services to provide optimal access and quality care that best suits the ever-changing needs of its patients. Funds raised by the Friends of WMMC enable the Medical Center to reach these goals.

WMMC OFFERS A FULL RANGE OF DIAGNOSTIC AND TREATMENT SERVICES INCLUDING:

Maternity & Pediatrics

State-of-the-art birthing suites and a family-centered approach ensure that giving birth is the wonderful experience it should be.

Emergency Care

Offering quality, full-service emergency medical care by Board-Certified emergency medicine physicians 24 hours a day, 7 days per week.

Inpatient & Outpatient Surgery

Our team of nurses and technicians are specially trained to provide care to pediatric, adult and elderly surgical patients. Surgical patients at WMMC represent a variety of specialties including general surgery, orthopedic surgery, gynecology, urology, and ear, nose and throat patients.

Outpatient Services

Services offered on an outpatient basis include: Radiology, Surgery, Cardio-Respiratory, Obstetrical, Urology, Neurology, Oncology, Pain Management, Cardiac Rehabilitation, Occupational Therapy, Physical Therapy, Laboratory, Nutritional Support and Sleep Laboratory.

Intensive Care

The Intensive Care Unit is specially equipped with state-of-the-art technology for critically-ill patients.

YES! I want to help improve the health of our greater community by making a contribution!

- Please use my gift where needed most.
OR
 Use my gift to support a specific program or department: _____
 Enclosed is a check in the amount of \$ _____ made payable to the Friends of Western Missouri Medical Center.
OR
 Please charge \$ _____ to my credit card:

Visa MasterCard American Express Discover

Card # _____ Expiration _____

Name (please print name as you wish to be recognized) _____

Address _____

City/State/Zip _____ Phone _____

All donations are perpetual gifts that will continue to touch the lives of those served by Western Missouri Medical Center for years to come.

**All gifts are tax deductible to the full extent allowed by law.*