PUBLIC SERVICE ANNOUNCEMENT – Patient Drive

From: Gift of Life Marrow Registry

5901 Broken Sound Parkway NW, Suite 600

Boca Raton, FL 33487

Contact: [Name]
Phone: [xxx-xxx-xxxx]
For Use: [Date 1 to Date 2]
Length: 30 seconds

[Name] needs a marrow transplant to cure [condition]. Just swipe a cotton swab inside your cheek and find out if you’re a lifesaving match for [him/her] or someone else with blood cancer.

[Name of sponsor/group] is holding a donor drive at [location] on [day], [date] from [start time] to [end time] to help [Name] find a donor.

If you’re 18 to 35 and in good health, join the Gift of Life Marrow Registry. You could get the chance to be a true hero and give a patient a second chance at life.

For more information, please visit [www.giftoflife.org](http://www.giftoflife.org).

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Gift of Life Marrow Registry is a 501(c)(3) non-profit organization dedicated to saving lives by facilitating bone marrow and blood stem cell transplants for patients with leukemia, lymphoma, and other blood disorders.