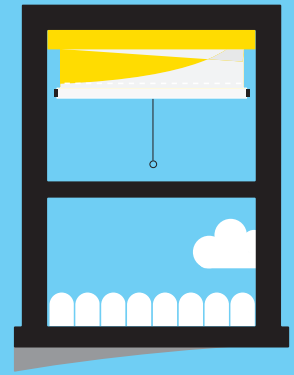


VOICES OF SAVE.

SUICIDE AWARENESS VOICES OF EDUCATION



SPRING
2006

THIS ISSUE Looking Back, Looking Forward **2** / Mothers with Depression **3** / Treating Depression with VNS **4** /

DEPRESSION TARGETS BABY BOOMERS

By Marit Brock

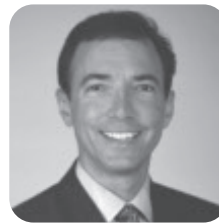
The results of the largest U.S. study of depression STAR*D (Sequenced Treatment Alternatives to Relieve Depression) were published in the October 2005 issue of the Archives of General Psychiatry. This study included face-to-face interviews with more than 43,000 adults in the country. Lead study author Deborah Hasin, Ph.D, is a professor of clinical public health at Columbia University.

Overall, the study found that the rates of major depressive disorder are increasing compared to these seen in similar studies conducted in the 1980s and 1990s. More than 5 percent of adults in the study experienced major depressive disorders in the previous 12 months, and more than 13 percent have experienced depression in their lifetime. In addition, the average episode of depression was found to be longer – an average of six months compared to four months in previous studies. In a new finding, study participants aged 45 to 64 were identified as having the highest lifetime risk for depression. Past research had demonstrated that younger adults were most at risk for depression. Study authors speculate that this result may reflect the baby boomers growing older, that is, the young adults in the 1980s are now moving into the middle-age group. The study showed that the risk of depression increases between the ages of 12 to 16 and risk increases gradually until middle age, although all age groups are affected by depression. Other groups with increased risk of depression include women, Native Americans, men and women who are widowed, separated or divorced, and low-income individuals.

In general, the study authors conclude that depression continues to be a major public health problem in our society. In addition, there was a strong link between depression and such other brain disorders as substance dependence (addiction), panic and generalized anxiety disorder and personality disorders. While the study found that 60 percent of individuals with depression received treatment specifically for depression, study author Hasin recommends that clinicians treating patients with disorders such as substance dependence also watch for major depressive disorder.

continued on page 2

SAVE THE DATE – for SAVE.



This year WCCO-TV's Chief Meteorologist Paul Douglas has expanded his annual SAVE celebrity golf tournament to three days with three great events:

- » Second Annual Paul Douglas Golf Classic presented by POPP.com at Bearpath Country Club in Eden Prairie, MN on Aug. 14
- » Fashion Show at Martini Blu in the Grand Hotel, Minneapolis on Aug. 13
- » Wine Tasting and Auction, Aug. 11 in Wayzata, MN

Thanks to Paul Douglas' commitment to SAVE as well as many corporate sponsors, the 4-Cast 4 Fun will be among the biggest events in the Twin Cities this summer.

For information about sponsorships, providing auction items or attending, please call 952-946-7998 or visit SAVE's Web site at www.save.org.

SAVE'S NEW LOOK

We hope you like the new look of SAVE. This was possible thanks to our good friends at KNOCK, inc in Minneapolis. Steve Richter, executive vice president of KNOCK, inc said, "As we worked to re-brand SAVE, it became obvious to us that it's more than just creating a new image. This project is about attracting someone's attention and compelling them to get help. If we have done our job well, we're not selling a product. We are potentially helping to save a life. That's why we are happy to donate our time and energies to create a new SAVE brand identity and educational materials." SAVE thanks KNOCK for helping us to SAVE lives.



LOOKING BACK, LOOKING FORWARD

By Dan Reidenberg, SAVE's Executive Director

Welcome to 2006 and a new and improved SAVE! 2005 brought a number of changes and exciting things to our agency and some significant accomplishments.

For example, in 2005 we reached more than 48.5 million people across the country with our media campaign efforts compared to 1.1 million in 2003. Our speaker's bureau tripled its efforts between 2004 and 2005, reaching more than 14,000 people. In 2005 we responded to more than 800 Web site requests nationally (72 internationally) and more than 2,400 telephone requests for information, support and resources. We also exhibited to more than 29,000 people and 20,000 received VOICES, our newsletter.

It was a terrific year and I want to thank all of you for helping us with your time, financial support, and years of dedication. We could not have done this without you.

Now it is time to look forward to where we are going. There are big plans for SAVE in 2006, the first of which you are seeing in this edition of VOICES. SAVE's new branding campaign, led by board member Marti Nyman, is being rolled out as this newsletter is printed. We worked hard over 2005 to create a new look and a new feel for SAVE that better represents who we are and what we do today. In coming months and years you can expect to see new graphics, messaging, and an updated Web site that will help solidify SAVE's presence as a leader in the field of suicide prevention.

Plans are moving ahead to complete the first ever research on the use of billboards in suicide prevention, and we expect to have 300 million exposures to our national multi-media

campaign in 2006. With the help of one family fund, over the next two years we will be developing a new "best-practices" adolescent suicide prevention curriculum which we hope to distribute nationally. New and better defined support, awareness, and fundraising efforts are already underway which will continue to move us into a stronger financial position. All of these efforts in 2006 will help us bring more quality improvements to our programs and more closely align our work with our strong mission.

Every day we come into the office and answer calls, talk to families and friends who come to get support, and respond to e-mails from all over the world. It is a grueling task some days when we receive four, five, six or more calls from people in desperate crisis. People often ask us "How do you do it? How can you deal with suicide and the families every day?"

I don't know that there is an easy answer to that question, but what I can share with you is that we all do it because we care. The dedicated and committed SAVE staff are passionate about their work and we all hold firmly to the belief that we can prevent suicide. However, at the same time, your support is invaluable. SAVE's staff can't do this alone. It takes many people, businesses, vendors, events, and donations to keep SAVE going. And that is really where you all come in. Your interest in learning more about suicide prevention keeps us working hard to find the best and latest information to share with you about our work. Your desire to help us in your communities helps us dream of developing new, innovative programs. You try to be there for people when they need it most, just as we do each time the phone rings or an e-mail is received. We are all in this together, and together we will SAVE lives.

DEPRESSION TARGETS BABY BOOMERS (CONTINUED)

The results of this study suggest a continued need to provide education and support services to individuals of all age groups and ethnicities. Access to affordable mental health services for low income individuals also can help address the risk of

depression in that demographic group. SAVE's mission is to increase awareness and reduce the stigma associated with brain disorders such as depression in order to encourage people to get help.

Editor: Georgia Ewing
Design: KNOCK, inc.
Production: by|design @ Sexton Printing
Printing/Mailing: Sexton Printing
Copy Editing: Patty Johnson, Richard K. Maguire
Executive Director: Dan Reidenberg, Psy.D., FAPA

Officers	Board of Directors		
Richard K. Maguire, President	Mark Anderson	Martin F. Nyman	Trish Stevens
Karen D. Lloyd, Ph.D., LP, Vice President	Thomas A. Arsenault	Miriam C. Olson	Lesley L. Zaub, Esq.
Mark Franklin, CPA, Treasurer	Randi J. Kaye	Joseph W. Stackhouse	
Matthew M. Myers, CPA, Secretary	Philip J. Kluesner	Janeen K. Steffel, CPA	
Geoffrey S. Workinger			
Contributing Writers: Marit Brock, Dave Morton, Patty Johnson, Dan Reidenberg			

SUCCESSFUL TREATMENT OF MOTHERS WITH DEPRESSION HELPS THEIR CHILDREN

DALLAS, March 21, 2006 – Children whose mothers are depressed are more likely to suffer from anxiety, mental-health problems and disruptive behavior than those whose moms aren't. And if the mothers don't get better, these kids' problems often become worse, new research shows.

Conversely, however, children whose mothers are successfully treated for their depressive symptoms show significant improvements themselves without any additional intervention or treatment.

The study, available online in the *Journal of the American Medical Association*, is the first, large-scale examination of the effects on kids when their mothers are treated for depression and scientifically monitored for a period of time. UT Southwestern Medical Center was one of several national sites participating in the study, which emphasizes the importance of evaluation and treatment of parental depression in an effort to help children and adolescents.

"The bottom line message is: 'Mothers who are depressed, go get treated for your depression. It will help not only you, but your child,'" said study co-author Dr. A. John Rush, vice chairman of clinical sciences and professor of psychiatry at UT Southwestern.

About one in 20 teens suffers from moderately severe to severe depression; it is one of the most common disorders of adolescence, according to the National Institute of Mental Health (NIMH). This means that in a high school population of 2,000 teenagers, 100 are likely to have a significant major depressive episode on any given day.

"Depression should not be taken lightly," said Dr. Madhukar Trivedi, study co-author and professor of psychiatry at UT Southwestern. "For kids' sakes particularly, we should be very aggressive in treating patients, particularly mothers. The more improved care we can provide to depressed mothers, the more benefit to their children."

Part of the largest national clinical trial on treatment for depression, called STAR*D (Sequenced Treatment Alternatives to Relieve Depression), coordinated by UT Southwestern and funded by the NIMH, the mother-child study included more than 150 pairs of mothers and their children, who varied in age from 7 to 17. The mothers were treated for depression in eight primary-care and 11 psychiatric outpatient clinics across the country as part of the \$35 million six-year STAR*D study.

Rush said mothers were studied rather than fathers because the rate of depression is higher in women than men, particularly in women of childbearing ages. Mothers are also more likely than fathers to bring their children in for assessments.

Children participating in STAR*D-Child were evaluated for depression at the beginning of the study and then reassessed after their mothers had been on antidepressant medications for three months. Many came into the study with significant problems; more than one-third had current psychiatric disorders including anxiety, depression and/or other disruptive behavior disorders. Almost half had a previous psychiatric disorder.

Three months later, kids whose moms remitted (or recovered from all depressive symptoms, based on a widely used measurement scale) showed an overall 11 percent decrease in rates of diagnoses for depression, as compared to an approximate 8 percent increase in rates of diagnoses in children of non-remitted mothers.

Of the children who were diagnosed with depression at the study's beginning, remission was reported in 33 percent of those whose mothers remitted, compared to only 12 percent remission rates in those whose mothers did not. Of the children with no diagnoses of depression at the study's onset, all children of remitted mothers remained symptom-free, while 17 percent of the children of non-remitted mothers acquired a diagnosis of depression during the three months.

Mothers who did not fully remit after three months, but did respond (showed a decrease in depressive symptoms by at least 50 percent) also had children who showed improvement. Additionally, when overall study results were analyzed based on mothers' educational levels, or both income and education, the statistics remained unchanged.

REPORT REVEALS THAT 1 IN 4 HAVE MENTAL HEALTH SYMPTOMS

A new report called National Comorbidity Survey Replication has revealed that one in four people say they had mental-illness symptoms over a one-year period. Though 41 percent sought treatment, many did not receive adequate care. Almost 23 percent sought treatment from a general practitioner, while 12 percent consulted a psychiatrist, and 7 percent used a complementary or alternative medical provider.

A recent story in the *Charleston Gazette* reported that some mental health experts hope the survey will encourage doctors to improve detection efforts and spur lawmakers, employers and insurers to place mental health care on the national agenda. A bill called mental health parity, which would require insurers to cover mental health benefits equally with physical health has stalled in Congress.

TREATING DEPRESSION WITH VAGUS NERVE STIMULATION

By Dave Morton

Imagine a world where you wake up one day feeling tired, blue, and depressed. After having your coffee and perhaps some breakfast, you still feel sluggish and inadequate. Then you remember: You had an electronic device implanted under your skin a few weeks ago, which might help. You press the ON button and slowly start to feel better. Half an hour later, you're ready to face the world again, feeling terrific, positive and full of energy.

» THIS MEANS THAT 100 PERCENT OF THE PATIENTS STUDIED SO FAR ARE RECEIVING BENEFITS.

Welcome to the possible future world of electronic brain stimulation.

Doctors are already treating depression with two new kinds of brain stimulation: vagus nerve stimulation and deep brain stimulation.

Deep brain stimulation (DBS) targets an area of the brain called "Brodman area 25," which is metabolically overactive in patients with treatment – resistance to depression. It is already in use as a treatment for Parkinson's disease and in research trials has shown promise in treating patients with chronic depression.

Vagus nerve stimulation (VNS) is out of the research stage and is available to patients now. It stimulates the vagus nerve with short pulses of electricity, using a small device about the size of a silver dollar implanted under the collarbone or in the armpit,

and attached to a nearby branch of the nerve in the neck. The vagus nerve, in turn, stimulates at least five areas of the brain related to mood, motivation, appetite, and sleep, and those that produce serotonin and norepinephrine (noradrenaline) – the body's natural anti-depressant chemicals.

VNS was originally developed to prevent epileptic seizure and was approved by the FDA in 2005 for use in long-term treatment of patients age 18 or older with chronic or recurrent depression extremely resistant to treatment. It is significantly improving the lives of about 50 percent of these most resistant cases and slightly improving several indicators of mood and mental health in the other 50 percent of the hard-core cases.

This means that 100 percent of the patients studied so far are receiving benefits from VNS – benefits from small to enormous.

With both DBS and VNS, stimulation of the brain is timed like a pacemaker, and the full, beneficial response may require anywhere from a month to two years. With DBS, part of the brain is calmed and soothed. With VNS, several parts of the brain are stimulated, and more neurotransmitters are produced.

In one case where VNS was used, a 50-year old woman in England, who had unsuccessfully tried all the mainstream treatments for depression for 12 years – including 21 rounds of electroshock therapy, was depression-free after about two or three months using the VNS device.

For more information on Vagus Nerve Stimulation, see: <http://www.vnstherapy.com/> (manufacturer – Cyberonics) <http://www.vagusnervestimulation.com/> (patient) and/or the book: "Out of the Black Hole" by Charles E. Donovan III.

DINNER AND SILENT AUCTION BENEFIT SAVE

More than two years ago, Becky Anderson lost her husband, Donald B. Anderson, to suicide. Don was an extremely gifted artist. Becky wanted to do something for all the people who continue to help her through her journey of surviving this loss.

She decided to host an elegant, exquisite dinner and silent auction for her family and friends to remember Don, to create awareness about depression and suicide, and to raise funds for SAVE's educational programs.

It seemed only proper to name the event "Designed to SAVE" in Don's memory. SAVE would like to thank Becky and her dedicated committee for raising \$56,000. Patty Johnson, SAVE's program director, says "I remember when she came to SAVE explaining she wanted to put together this event, and Becky said she had never done anything like this before. I have to congratulate her for one of the best events SAVE has been apart of. It was truly an inspiring evening and one SAVE will never forget. Thank you."

CALIFORNIA FASHION SHOW BENEFITS SAVE

Leadership, vision, team work, commitment – these are words that only touch the surface of the qualities and talents of Lauren Hall and her committee members at Mission San Jose High School in Fremont, Calif.

Beginning in the fall of 2005, Lauren, a senior at her high school, set out to create an event to raise awareness and support SAVE. Her committee included Rena Muni, Rawee Gobena, Chris Won, Matt Brandt, and Jonathan Ting.

As part of the leadership class led by teacher Ben Breazeale, Lauren and her team planned a Teen Suicide Prevention Week, culminating in an annual charity fashion and talent show, “Heart to Heart.” With a plan to raise money that would help SAVE spread its message, Lauren invited SAVE to visit her high school. Psychology classes were educated on depression, suicide and suicide prevention. Messages and flyers were distributed to more than 2,000 students and all were encouraged to donate and to support SAVE.

» **WHEN ALL THE DONATIONS WERE TALLIED, LAUREN AND HER TEAM RAISED \$4,700.**

To prepare for the fashion show, the committee designed a stage, planned decorations, held auditions and rehearsals for the models and talent, and prepared a PowerPoint slideshow. Lauren mixed two hours of music to match the show. More than 50 kids from the school picked out casual and formal wear, obtained clothing donations from community merchants, and practiced their runway walks.

Finally, after months of planning and coordinating, “Heart to Heart” was held Feb. 11. And despite running into obstacles along the way (questioning whether depression and suicide was the right topic, after-school activities in the gym the day before the event, preparations for sound, lighting, and a state-of-the-art PowerPoint presentation), Lauren and her committee held one amazing event.



» SAVE's Executive Director Dan Reidenberg, center, with show organizers Lauren Hall, left and Rena Muni, right.

They created a story line on fashion and social relationships to choreograph the show, taking someone unhappy, lonely and depressed to bright, participating, and hopeful (including an invitation to the prom) by the end of the show.

Singers wowed the audience and the programs acknowledged local businesses that helped with donations. The group also obtained special lighting, decorated the gym, sold tickets to the show, and arranged for reserved table seating with refreshments. Silent auction items and raffle prizes were secured. Student volunteers served refreshments to the reserved tables and refreshments were served to increase revenue.

When all the donations were tallied, Lauren and her team raised \$4,700, the largest amount ever for a charity from their annual fashion and talent show! SAVE could not be more proud to receive their donation. Thanks to Lauren, Rena, Chris, Rawee, Matt and Jonathan for the excellent work they did on “Heart to Heart.”

LEGISLATIVE UPDATE

SAVE is monitoring and supporting the following legislation:

- » To fully fund the Garret Lee Smith Act for \$27 million.
- » Senator Paul Wellstone Mental Health Equitable Treatment Act of 2003. This bill will end discrimination against mental illness health care coverage.
- » The Elementary and Secondary Counseling Program (ESCP) to provide funds for schools with the necessary resources to establish and enhance school counseling programs.

WORDS FROM A LOVING FATHER

By Robert B. Merhar



>> **EDITOR'S NOTE:** Robert Merhar has written a collection of poems in memory of his son, Sean, who died by suicide. Through his poems, he hopes to bring a greater understanding of suicide and its effects on families and loved ones. Merhar, who lives in River Falls, Wisconsin, is a SAVE volunteer.

A great sadness has come to me
My life has changed for eternity

The many days and nights I've cried
Inside a part of me has died

My son Sean – just twenty-three
Took his life – his soul set free

His life on earth was filled with pain beyond our comprehension

But that was then, and this is now, and we survivors know
How deep the pain can be

When time stood still – the onslaught came,
and took us all to hell

The terrible moment frozen in our minds
The day the laughter died

The darkness came and stayed
We came together, the three of us, Mother, Father, Brother
Left here on this earth

We thought of joining Sean you see
to find his loving mirth

Once four, now three, we struggled to survive

First loss, then guilt, then anger and more pain,
then forgiveness and denial –
we want him back again

But it is not to be, in this earthly realm.

Not ours to see and touch,
nor hear his familiar voice
But he is here as sure as we, in our hearts he lives

Within us now until we die his seeds of love are sewn
And there they'll stay and there they'll grow until we meet again

When the three are four once more, in love's eternal embrace.



SAVING LIVES AFTER KATRINA

SAVE was called to train more than 700 first responders on how to handle crisis and suicide calls. The operators were trained on how to assess risk, intervene and provide referral services to callers. SAVE created and designed a call log for operators and a training program for operators to implement. Operators were trained throughout the country, but primarily in cities in Louisiana, Alabama, Mississippi and Texas.

THE GATEWAY TO LIFE

By Dave Morton

Two people stood on the breezy ledge of the swaying Golden Gate Bridge on the morning of Sept. 25, 2000: Kevin Hines, the normal, strong young man with plans and ambitions, and Kevin Hines the frightened, depressed, tearful person, who felt unfit and unworthy to live and knew he must end his life.

A bipolar mental disorder had depressed the “old” Kevin. More than a dozen questionable prescription pills had depressed him even further.

The allure of the bridge’s beauty – and its accessibility – drew him to this beacon of hope and validation to end his life, and to make a statement to those he would leave behind: He was a worthy, noble person at his core despite this act, and should be remembered that way by those he loved.

His eyes had begged for help from strangers, but no one on the bridge asked him if he was okay, if he would like some help, if he was suffering, or if he needed a friend, and the feelings of re-confirmed worthlessness crushed what little was left of his low self-esteem.

Crying hysterically, Kevin jumped – only to have his old, strong self suddenly emerge and try to save itself. Fortunately, he survived the plunge and fought his way to the surface. The Coast Guard fished him out of the bay, and he slowly recuperated in a San Francisco hospital. At age 19, he was one of 26 lucky ones who have survived the 220-foot leap. And as the strong Kevin lived, the depressed Kevin began to fade away.

Kevin was an impulsive jumper – not a person determined to commit suicide. As Dan Reidenberg, SAVE’s executive director, explains, “When someone is suicidal they tend to become impulsive and their judgment is impaired. A barrier for the Golden Gate Bridge would help prevent impulsive thoughts and behaviors from becoming a permanent loss of life.”

Kevin agrees. Among the several anti-suicide roles he currently has is serving as an advocate for a project to build a higher barrier on the GGB to foil impulsive jumpers, giving them more time to get help. As Kevin says, “The trouble with suicide is that it’s a permanent solution to a temporary problem.”

Today, although still a college student, Kevin finds time for his new life of helping to save lives, often in partnership with SAVE – from speaking to students at Prior Lake High School in Minnesota, to speaking to a local military airlift wing, raising awareness in the community, and giving inspiration to many.

SAVE is honored to partner with Kevin Hines in his life-saving mission, Reidenberg says. “We are our brother’s keeper,” says Kevin. He’s a keeper, all right.



CALENDAR OF EVENTS

39TH American Association of Suicidology Annual Conference and Crisis Center Conference
April 28 - May 1
Grand Hyatt, Seattle
www.suicidology.org

18th Annual Healing After Suicide Conference
Sponsored by American Association of Suicidology and SPAN USA
April 29
Grand Hyatt, Seattle
www.suicidology.org

Suicide Awareness Memorial
St. Joan of Arc, Minneapolis
May 6
952-946-7998

Out of the Darkness Overnight, San Francisco
July 22
www.TheOvernight.org

2nd Annual Site & Signs Golf Tournament benefiting Yellow Ribbon
July 26, 2006
507-387-5020
www.golfdetails.com

4-Cast 4-Fun
3 Days, 3 Great Events Benefiting SAVE:

Wine Tasting and Silent Auction
August 11
952-946-7998

Martini Blu Fashion Show
August 13
Martini Blu, Grand Hotel, Minneapolis
952-946-7998

Paul Douglas Celebrity Golf Tournament
Bearpath, Eden Prairie, Minn.
August 14
952-946-7998

SAVE Walk for Mental Health
August 19
Lake Harriet, Minneapolis
952-946-7998
www.walkformentalhealth.org

VOICES OF SAVE.

SUICIDE AWARENESS VOICES OF EDUCATION

Tel 952.946.7998 or 1.888.511.SAVE
Fax 952.829.0841 >> www.save.org

The mission of SAVE is to prevent suicide through public awareness and education, eliminate stigma, and serve as a resource for those touched by suicide.

9001 E. Bloomington Freeway, Suite 150
Minneapolis, MN 55420

NONPROFIT ORG.
U.S. POSTAGE
PAID
MINNEAPOLIS, MN
PERMIT NO. 26157

SAVE PUBLICATIONS AND EDUCATIONAL MATERIALS ORDER FORM

SAVE'S SUICIDE PREVENTION COMMUNITY ACTION KIT

YOU DON'T NEED TO REINVENT THE WHEEL.

SAVE's Suicide Prevention Community Action Kit is filled with tools such as depression awareness and suicide prevention educational handouts, public awareness materials, pre-printed and pre-recorded ads, community education programs (how to build a speakers' bureau and start a school-based program, etc.), materials for the press and the public, reproducible products, suggested activities, as well as contact and resource information, and much, much more.

"The kit has been an invaluable resource for our student suicide prevention program. Each high school in our district ordered a kit."

– Anne Erickson, Licensed Counselor
Mahtomedi High School

Thank you for making my job easier as the new suicide prevention coordinator for Chippewa County Family Services. The materials in the kit provided me with everything I needed.

– Jennifer Husby, Suicide Prevention Coordinator
Chippewa County Family Services



EDUCATIONAL MATERIALS

- Community Action Kit
- Depression: Information Everyone
- Can Use Folders (Pk 10)
Booklet only
- What to Do-Guide for Young People (Pk 20)
Booklet only
- Suicide: Coping with the Loss of a Friend or Loved One (Pk 10)
Booklet only
- SAVE Corporate Brochure (Pk 25)
- General Poster
- Teen Poster
- Adult Wallet Card (Pk 100)
- Youth Wallet Card (Pk 100)

BOOKS

- Suicide: Survivors

PUBLIC SERVICE ANNOUNCEMENTS

- Radio
- Print
- Billboards - 30 Sheet Posters
- Billboards - 14'x48' Bulletins
- Television

Qty.	Price	Total
	\$145.00	
	\$40.00	
	\$2.00 each	
	\$40.00	
	\$75 each	
	\$40.00	
	\$1.50 each	
	\$6.25	
	\$1.50 each	
	\$1.50 each	
	\$20.00	
	\$20.00	
	\$15.95	
	\$4.00 /CD	
	\$85.00	
	\$85.00 each	
	\$1,050.00 each	
	\$22.00	

Subtotal _____
MN residents add 6.5% tax _____

If exempt, include Tax Exempt ID# _____

Shipping Costs: \$4.00 for 1-4 units; \$8.00 for 5+ units; \$4.95 per Kit

Please include my tax deductible contribution to SAVE _____

TOTAL \$ _____

Method of payment:

Check or money order enclosed Please bill my credit card:

Card # _____ / _____ / _____ / _____ VISA MasterCard

Exp. date: _____ Signature: _____

Ship to:

Name _____

Address _____

City _____ State _____ Zip _____ Phone _____

Bill to: (if different from above)

Name _____

Address _____

City _____ State _____ Zip _____

Return this form to:

SAVE >> Suicide Awareness Voices of Education™ 9001 E. Bloomington Freeway, Suite 150, Minneapolis, MN 55420
Tel 952.946.7998 or 1.888.511.SAVE >> Fax 952.829.0841 >> Order on-line at www.save.org



SAVE DEPENDS ON SUPPORTERS LIKE YOU.

SAVE depends on contributions from people just like you who understand the need for ongoing education around the important topics of depression and suicide prevention. Won't you help?

Please give SAVE a call at 952.946.7998 x22 or via e-mail @ www.save.org if your address has changed. Thank you.