



WAYNE STATE UNIVERSITY

Medical Alumni Association

Since 1868, the Wayne State University School of Medicine has educated and trained many of the country's most brilliant general practitioners, specialists and researchers. The WSU School of Medicine has a stated mission of improving the overall health of the community and providing health care for uninsured and underinsured people of metropolitan Detroit. We are extremely proud that our graduates are some of the most compassionate and generous physicians, providing millions of dollars of uncompensated care annually.

On Saturday April 26, 2025, the Alumni Association will host its annual Medical Alumni Reunion Dinner and Award Ceremony to honor its alumni. We ask for your support through the donation of a gift certificate or merchandise that will be used as an auction item at this year's event. Donors will receive prominent recognition in the event program.

Your donation will help make the auction a success and will show appreciation for those who have devoted their lives to improving the health and well-being of others. Proceeds from the event will benefit the Medical Alumni Annual Fund, which supports programs and initiatives that have a direct and immediate impact on students' academic success and professional growth.

If you have questions or need additional information, please contact Lisa Ramos, assistant director of Alumni Affairs, at 313-577-9022 or lramos@med.wayne.edu.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads "Piero A. Simone, M.D." with a stylized flourish at the end.

Piero A Simone, M.D. '95
President, WSU Medical Alumni Association



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*Help recognize the Wayne State University School of
Medicine for educating and training the nation's
leading researchers and physicians and for providing
uncompensated care to those in need! Promote your
business to hundreds of medical professionals and
show your support by donating a gift certificate or
merchandise to the 2025 WSU Medical Alumni
Reunion Auction.*

Silent Auction Donation Form

Contact Information:

Company or donor: _____

Contact person: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

Email: _____

Print name/business as it should appear in the event program for recognition:

Gift description (include restrictions): _____

Estimated Value: \$ _____

Expiration Date: _____

Please return this form to:

WSU School of Medicine

Office of Alumni Affairs

540 E. Canfield Ave.

1369 Scott Hall

Detroit, MI 48201

Email: lramos@med.wayne.edu