

The John Alford Fellowship



John Alford

An Invitation

Original founders of The John Alford Fellowship include John's daughter and son-in-law, Barb and Mike Cantlin, and his son, Ron Alford. They, and the other members of this distinguished level of giving, invite you to join them in helping to ensure the future of healthcare for Licking County. Your help is both welcome and needed.

Join The John Alford Fellowship online – a new, convenient option to show your support.

Use the QR code below to access Licking Memorial Health Foundation's secure donation page. Under Donation Type/Comment, please specify your intention to join The John Alford Fellowship, your preferred payment plan, and how you wish your name to appear on the membership list and Donor Wall. Thank you for your interest in supporting Licking Memorial Health Systems.



**Licking Memorial
Health Foundation**

1320 West Main Street
Newark, Ohio 43055
(220) 564-4102

LMHealth.org

1955-5005
04/21/2025



A Standard of Caring

The John Alford Fellowship was created in 1996 by the Licking Memorial Hospital (LMH) Development Council to memorialize the extraordinary commitment of the Hospital's longtime friend and supporter, John W. Alford.

John began his local business career in 1935 as a teller at Park National Bank (PNB). He later served as Vice President, President, CEO, and Chairman of the Board of PNB. In spite of a busy professional life, John found time to serve his community in many ways. To recognize his impact on the community, the Development Council named John as the first recipient of the newly created annual Lifetime Achievement Award in 1989.

John's dedication and leadership helped LMH become a reality. In 1961, he became the Finance Chair for the Newark Hospital Finance Committee – a group responsible for securing the necessary support to construct a new community hospital. John later served as Chair of the Licking County Hospital Commission and as head of the Special Prospects Committee of the Development Council – a group formed to secure financial support for LMH.

As General Chairman of the Citizens Committee to build a new hospital in the 1960s, John was quoted as saying, "Building a modernly equipped hospital is probably the most important project that the people of Licking County will undertake in this generation." He went on to say, "The new hospital will have a

direct effect on the health of every man, woman, and child in the entire county."

John demonstrated a standard of caring that rarely exists elsewhere. In 1966, 81 patients were moved into the innovative and technologically advanced healthcare facility known today as Licking Memorial Hospital.

Membership Eligibility

Membership in The John Alford Fellowship is extended to anyone who makes a commitment of \$25,000 or more with up to 10 years to fulfill the pledge. The donor may specify how the commitment will be met, and recurring payments may be established. A gift of this nature is tax-deductible to the extent allowed by law. By joining The John Alford Fellowship, a donor affirms John's belief in the need for quality healthcare at the local level.

In Recognition of Your Gift

In grateful appreciation for becoming a member of The John Alford Fellowship, your name will be displayed on the beautiful Donor Wall located in the Hospital's Main Lobby. Members' names are also proudly included in important publications, and members are invited to attend a variety of special programs at the Hospital throughout the year.

The John Alford Fellowship Statement of Intent

I/We accept your invitation to become a member of The John Alford Fellowship. I hereby signify my intention, without in any way legally binding myself or my estate, to contribute as follows:

A total commitment of:

\$25,000

Other

\$

This commitment is to be met as follows:

(Please describe payment plans.
Recurring payments may be established.)

Please make checks payable to Licking Memorial Health Foundation. Credit/debit card gifts are accepted online at LMHealth.org or by phone. Please call (220) 564-4102. Gifts are tax-deductible to the extent allowed by law.

Signature

X

Date

Signature
of spouse

X

Date

Please print how you wish your name(s) to appear on our membership list and Donor Wall. Information other than your name will not be published.

Name

Address

City

State

Zip

Email

Phone

I prefer to remain anonymous.

