



Please use my gift to help fight brain tumors

\$500\_\_\_ \$250\_\_\_ \$100\_\_\_ \$50\_\_\_ Other \$\_\_\_\_\_

My company's Matching Gift Form is enclosed.\_\_\_\_

***Do Not Send Cash***  
**Make check payable to: *The JAG Fund***

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email

My gift is \_\_\_\_\_ in memory of \_\_\_\_\_ in honor of

Name \_\_\_\_\_

Special occasion: \_\_\_\_\_

Please send a card acknowledging my gift to: *(amount of gift is not disclosed)*

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

*The Commonwealth of Pennsylvania holds an official copy of our registration and financial information. You may obtain a copy by calling toll free 800-732-0999.*