

PLEASE MAIL THE BOTTOM OF THIS FORM WITH YOUR DONATION TO:

Lance Armstrong Foundation
National Mail Processing Center
PO Box 6002
Albert Lea, MN 56007-6002

DONATE ONLINE:
LIVESTRONG.org

DONATE VIA PHONE:
512.236.8820

Your donation to the LAF will provide direct support and education to help cancer survivors face the challenges and changes that come with cancer:

- \$10 provides information packets to 16 cancer survivors to offer support, inspiration and hope
- \$50 provides 36 people cancer survivorship information, worksheets to organize their fight against cancer and support, inspiration and hope from other cancer survivors
- \$155 provides a cancer survivor one-on-one direct support through the **LIVESTRONG** SurvivorCare program
- \$250 provides **LIVESTRONG** Survivorship Notebooks to 27 cancer survivors

IMPORTANT:

- For mailed donations, please fill this form out completely and legibly to avoid processing delays.
- All donations are **NON-REFUNDABLE** and **NON-TRANSFERABLE**.
- All donations are tax deductible to the extent allowed by law.
- Anyone who includes an email address will receive a receipt via email. Anyone who does not include an email address will receive a receipt via mail.
- We accept check and credit card donations. (Unfortunately we cannot accept cash donations.) One check per donation form.

MATCHING GIFTS

Check to see if your company will match your donation to the Lance Armstrong Foundation to increase the impact of your gift. Whether you made your donation online or by mail, please send the completed matching gift form to:

Lance Armstrong Foundation
National Mail Processing Center
Attn: Matching Gifts
PO Box 6002
Albert Lea, MN 56007-6002

ABOUT THE LANCE ARMSTRONG FOUNDATION

Founded in 1997 by cancer survivor and champion cyclist Lance Armstrong, the Lance Armstrong Foundation (LAF) unites people through programs and experiences. The LAF empowers cancer survivors to live life on their own terms and raises awareness and funds for the fight against cancer. Unite and fight cancer at **LIVESTRONG.org**.

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Lance Armstrong Foundation Tax ID: 74-2806618



1. DONOR CONTACT INFORMATION

MSC 00000

FIRST NAME	MI	LAST NAME	COMPANY
MAILING STREET ADDRESS			SUITE/APT. NO
CITY	STATE	ZIP	COUNTRY
EMAIL ADDRESS	<input type="checkbox"/> I DO NOT WISH TO RECEIVE ADDITIONAL INFORMATION FROM THE LAF		PHONE (MANDATORY FOR CREDIT/DEBIT)

2. DONATION INFORMATION

AMOUNT: \$ _____

CHECK **PLEASE MAKE CHECKS PAYABLE TO LANCE ARMSTRONG FOUNDATION**

CREDIT (SINGLE PAYMENT) TYPE: AMEX VISA MC DISC

CREDIT CARD NUMBER	EXP. DATE (MO/YR)	CVV #
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SIGNATURE FOR CREDIT CARDS _____

3. TRIBUTE CARD INFORMATION (OPTIONAL)

IN HONOR MEMORY (CHECK ONE)

IN HONOR/MEMORY OF NAME	RECIPIENT'S NAME	
MAILING STREET ADDRESS	SUITE/APT. NO	
CITY	STATE	ZIP

HOW YOUR NAME SHOULD APPEAR ON TRIBUTE CARD (I.E., MR. SMITH, SMITH & CO., SMITH FAMILY)