

10.	First & Last Name	Address	Phone
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8.	First & Last Name	Address	Phone
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2.	First & Last Name	Address	Phone
1.	First & Last Name	Address	Phone



Committed to a Cure

R.S.V.P.



We are Committed to a Cure.

At the gala, JDRF will offer its guests the opportunity to fund essential research that will lead to a cure. Fund A Cure will provide you with the chance to make a contribution that directly funds JDRF's Artificial Pancreas Project. Contributions are 100% tax-deductible. If you are unable to attend this year's Gala but would like to participate you may do so by returning this card.

Hope can become reality through our special Fund A Cure program.

FUND A CURE \$ _____

TICKETS Please reserve _____ seats at \$150 per person for the names listed on the back of this card.

DONATION \$ _____

I cannot attend, but please accept the enclosed donation to support diabetes research.

PLEASE R.S.V.P. BY JANUARY 25, 2010

NAME

COMPANY NAME

E-MAIL

ADDRESS

CITY

STATE

ZIP

DAY TELEPHONE

EVENING TELEPHONE

PAYMENT INFORMATION

My check for \$ _____ is enclosed. (Payable to the Juvenile Diabetes Research Foundation)

Please bill my credit card Visa MasterCard American Express Discover

CARD NUMBER

EXPIRATION DATE

SIGNATURE

Under IRS Guidelines, your contribution in excess of \$80.00 per person is tax deductible.

601.981.1184
www.jdrfmississippi.org

