



**YES! I WANT TO HELP
provide patient support and education and promote
research by funding TNA's work.**

Please print your name as you wish it to appear on note card

- In honor of _____
- In memory of _____
- Personal donation

If you want us to notify the family or individual of your gift, please provide us with their name and mailing address.

Name _____

Address _____

City _____ State _____ Zip _____

***TNA is a nonprofit 501C(3) Tax exempt organization.
Gifts are tax deductible to the amount allowed by law.***

Donor Name _____

Address _____

City _____ State _____ Zip _____

- My check is enclosed
- Please charge my credit card: MasterCard Visa Discover AmEx

Account # _____ Exp. Date _____

Signature _____

Donate securely online at www.endthepain.org or call 1-800-923-3608

TNA mailing address: 925 NW 56th Terrace, Suite C, Gainesville, FL 32605-6402

A copy of the official registration and financial information may be obtained from the division of consumer services by calling toll-free within the state, 1-800-435-7352. Registration does not imply endorsement, approval or recommendation by the state.