

Thank you for supporting our work to help advance new science and high-impact research to prevent and treat stroke. Every donation makes a difference in finding stroke answers.

| Your gift: □\$50 □\$100 □\$250 □\$500 □\$1,000 □Other \$ | |
|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| | I would like this to be a monthly gift (when you give monthly, you support our efforts to treat and prevent stroke year-round) |
| | I would like to make this gift in honor of someone. |
| | Name: |
| | My company will match my gift, please contact me. |
| | |
| Name | |
| Addre | ss |
| Email | |
| Phone | |
| | |
| $\hfill\square$ Keep me informed of the Dr. Jeffrey Thomas Stroke Shield Foundation's work in stroke research through email. | |
| $\hfill\square$ I have enclosed my check made payable to the Dr. Jeffrey Thomas Stroke Shield Foundation | |
| Thank you on behalf of the patients who depend upon our work for their treatment and our research to prevent and treat stroke! | |