

Please consider a donation to the Propionic Acidemia Foundation this holiday season

Name		
Address		
City	StateZip	
Yes, I/we will	donate: "\$25 "\$50 "\$100 "\$250 "\$500 "\$1000 " othe	er \$
Enclosed is m	check payable to Propionic Acidemia Foundation.	
 My compan 	will match this gift; company matching form enclosed.	
This gift is in	nonor of/ in memory of :	
Please send a	acknowledgement to: Name	-
Address		
City	StateZip	
	PROPIONIC ACIDEMIA FOUNDATION	
	PO Box 151	
	Deerfield II 60015-4421	

www.pafoundation.com 1-877-720-2192 Your gift is tax deductible as allowed by law.



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