



Paul's Run for Epilepsy  
c/o Merry Wurster 4620 Kelly Road, Island Lake, IL 60042  
847-639-7061  
[www.PaulsRunForEpilepsy.org](http://www.PaulsRunForEpilepsy.org)  
[info@paulsrunforepilepsy.org](mailto:info@paulsrunforepilepsy.org)

*Taking Steps to Find a Cure*

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## HOW TO BECOME A PAUL'S RUN SPONSOR:

1. All sponsors must complete appropriate sponsor form (donation or in-kind) below.
2. Please enclose above form along with credit card information or check made payable to "CURE."
3. Mail donation to:  
Paul's Run for Epilepsy  
c/o Merry Wurster  
4620 Kelly Road  
Island Lake, IL 60042
4. Email your camera-ready artwork (logo/company name) as you wish it to appear on our website and T-shirt to [info@paulsrunforepilepsy.org](mailto:info@paulsrunforepilepsy.org). (.eps or .ai format for logo preferred, will accept jpeg.) When you send the email, please note your business website so we can link your logo to your site.

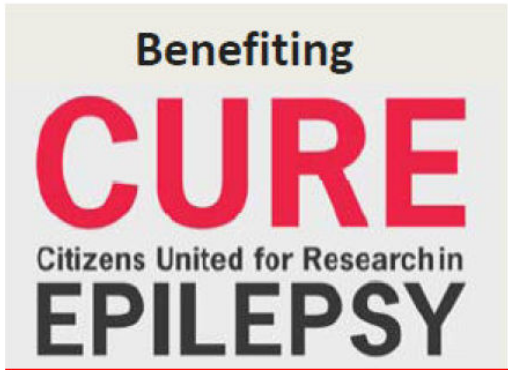
NOTE: Logos and donations must be received no later than September 16, 2011 to be eligible for inclusion on the T-shirts.

You may also make donations online via the registration page on the website. However, to ensure that your logo/company name appears on the website and t-shirts, please email your logo and website information to [info@paulsrunforepilepsy.org](mailto:info@paulsrunforepilepsy.org).

For questions please contact Merry Wurster @ 847-639-7061 or email us at [info@paulsrunforepilepsy.org](mailto:info@paulsrunforepilepsy.org). We look forward to hearing from you!

With sincere thanks,  
The Paul Schmidt Family

CURE is a non-profit 501 (c) (3) organization supported by the generous contributions of individuals, corporations and foundations. Your contribution is tax-deductible to the extent allowed by law.



## Donation to CURE

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In Support Of (Event Name): \_\_\_\_\_

Donor Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Please enclose your check made payable to "CURE", or fill in the credit card information below:

Card number: \_\_\_\_\_ Expiration: \_\_\_\_\_

CURE is a non-profit 501(c)(3) organization. Your contribution is tax-deductible to the extent allowed by law.



## In-Kind Contribution to CURE

In Support of (Event Name):

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Donor Name:

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Address Line 1:

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Address Line 2:

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City:

State:

Zip:

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Email Address:

Phone:

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Description of Item or Service (please be specific):

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Estimated Fair Market Value: \$

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Expiration Date (for gift certificates or services):

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