



Thank you for your donation of \$______ in support of the Epilepsy Foundation of Minnesota's United in Epilepsy Regional Walks. Your gift will help the Epilepsy Foundation of Minnesota educate, connect and empower people affected by seizures.

Date: _____

EPILEPSY FOUNDATION MINNESOTA

RECEIPT FOR CASH DONATION

Thank you for your donation of \$______ in support of the Epilepsy Foundation of Minnesota's United in Epilepsy Regional Walks. Your gift will help the Epilepsy Foundation of Minnesota educate, connect and empower people affected by seizures.

Date:	
-------	--



RECEIPT FOR CASH DONATION

Thank you for your donation of \$______ in support of the Epilepsy Foundation of Minnesota's United in Epilepsy Regional Walks. Your gift will help the Epilepsy Foundation of Minnesota educate, connect and empower people affected by seizures.

Date:		
-------	--	--



Tax ID # 41-0874541



Tax ID # 41-0874541

Regional Walks



Tax ID # 41-0874541