



Donation Form

Please print the form, fill in, and mail check (payable to JMCC)
445 Hwy 46 South
Suite 29-204
Dickson, TN 37055

Mission: To fund research of rare childhood diseases and to provide resources for families of the children who suffer from these illnesses.

Donor Information *(please print or type)*

Name			
Company (if applicable)			
Billing Address			
City			
State		Zip	
Telephone (home)			
Telephone (business)			
E-Mail			

☐ Check here if you wish to remain anonymous

Donation Information *(checks only payable to Josie Mazzo Children's Charities)*

I/We want to support JMCC's mission through my/our gift. Please use my/our gift of \$_____ to support JMCC's work. I/We would like the donation to help with:

<input type="checkbox"/>	Families of children with long-term medical conditions
<input type="checkbox"/>	Non-profit organizations that support families and children <i>(JMCC currently supports United Mitochondrial Disease Foundation, Ronald McDonald House Charities of Middle Tennessee, Monroe Carell, Jr. Children's Hospital at Vanderbilt and Williamson Medical Center.)</i>
<input type="checkbox"/>	JMCC's operations and programs
<input type="checkbox"/>	JMCC may decide how best to use my gift
<input type="checkbox"/>	Other: (please specify)

Gift will be matched by _____ (company/family/foundation).
____ form enclosed ____ form will be forwarded

Acknowledgement Information *(if applicable)*

<input type="checkbox"/> In Memory of:		<input type="checkbox"/> In Honor of:	
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Please send an acknowledgement to the honoree or other relatives listed:

Name			
Relationship <i>(i.e. wife, son, friend, etc.)</i>			
Address			
City			
State		Zip:	

THANK YOU FOR YOUR SUPPORT OF THE JOSIE MAZZO CHILDREN'S CHARITIES AND VISITING OUR WEBSITE, www.JosieMazzo.com.
Josie Mazzo Children's Charities (JMCC) is a 501(c)3 nonprofit organization under the regulations of the IRS.
All contributions to JMCC are tax-deductible to the extent provided by law.