

DONATION RECEIPT

The Side-Out Foundation A 501(c)(3) non-profit organization 11208 Waples Mill Rd. #103 Fairfax, VA 22030

E-mail: info@side-out.org **Phone:** 877.344.7465 **Tax ID:** #20-2510044

On behalf of The	Side-Out Foundation	n, we would	I like to thar	nk you for	your
donation received	on no b	·			

Your contribution will assist Side-Out in its mission to give more time to those living with metastatic breast cancer. With your donation, we are able to serve more patients in Side-Out's Individualized Precision Medicine Analysis Program. providing them and their oncologists with an unprecedented treatment report that doesn't exist anywhere else.

Every patient we serve gets us one step closer to understanding metastatic breast cancer and changing cancer care forever. Thank you again for your generous support.

Event: Dig Pink Event

Contribution Type: Donation

Donor Name: _____

Total Amount: ____

All donations are tax-deductible