2010 DONATION Form

Want your donation posted to the website faster?
Give **online** by credit card at www.StBaldricks.org or by **phone** at (888) 899-BALD (2253).

For donations by check or cash,
Please use one donation form per gift to keep expenses low and funds for childhood cancer research high! Donations are tax-deductible in the U.S., and you will receive a gift acknowledgement for tax purposes. Our IRS nonprofit ID # is 20-1173824.

Shavee Name	ID#	Event Year	Team	Site
n/a	n/a	2010	n/a	Collingswood Firefighters for a Kids' Cure
			n/a	E-22

Step 1: Donor Information

This gift is from a Business/Foundation/Organization

Name of Business /Foundation/Organization
(This name will appear on website unless marked anonymous below.)

❑ Mr. & Mrs. ❑ Mr. ❑ Mrs. ❑ Ms. ❑ Dr. ❑ Other _____

Contact Person: Name MI Last

Position/Title

OR

This gift is from an Individual/Family

❑ Mr. & Mrs. ❑ Mr. ❑ Mrs. ❑ Ms. ❑ Dr. ❑ Other _____

Name(s) MI Last

Name to publish, if different (ex: Aunt Mary)

Step 2: Optional Gift Information

❑ This gift is **ANONYMOUS.** *(Only the shavee will see your name.)*

❑ This gift is

❑ in memory of
❑ in honor of

Name(s) MI Last

To increase your gift, please attach your company's matching gift form *(check with your human resources department)*.

Step 3: Address

E-mail _____
This is our most cost-effective way to send you a tax receipt. We do not rent, share or sell your information, and you can discontinue emails at any time.

❑ Home
❑ Work

Address

City *State* *Zip* *Phone:* ❑ *Home* ❑ *Work* ❑ *Cell*

Step 4: Donation

Donation amount: ❑ **$1,000** ❑ **$500** ❑ **$250** ❑ **$100** ❑ **$50** ❑ **Other $** _____

❑ Check

(Gifts made by check will be processed electronically to reduce processing and bank fees. To opt out of this process, please contact us.)

- Make checks payable to: **St. Baldrick's Foundation**.
- Please write **shavee name & ID#** in memo line of check.

❑ Cash

Please do not mail cash.
Give this form with cash to shavee, or turn in cash with form at event.

Please return this completed form with payment to your shavee, or send to:

St. Baldrick's Foundation
1333 S. Mayflower Avenue, Suite 400
Monrovia, CA 91016-5268

THANK YOU!