Printable Donation Form

MAIL COMPLETED FORM TO:
Susan G. Komen, Attn: Trish Davis,
13770 Noel Road, Suite 801889,
Dallas, TX 75380

BILLING INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: (_____) _____ Cell phone: (_____) _____

Email address: _____

☐ Donate by check
☐ Donate by credit card
Please charge my credit card with my contribution of $_____ ☐ Monthly ☐ One-time
(All amounts will be charged in U.S. Dollars.)

Credit card type: ☐ American Express ☐ Discover ☐ MasterCard ☐ VISA

Please print card number using **black** or **blue** ink. Exp. date (MMYY) CVC

Name on Card (Please print name clearly): _____

Authorizing Signature: _____

TRIBUTE INFORMATION

If you would like to make this donation in honor or in memory of someone, please fill in the information below.

☐ My donation is in honor of _____
Name of individual

☐ My donation is in memory of _____
Name of deceased

Would you like Komen to send a card to someone as notification of your honor or memorial donation?
Your gift amount will not be included in the card.

☐ No, do not send a card
☐ Yes, send a card to:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Personal message and signature *(maximum of 120 characters):*

_____

_____

To give from a Donor-Advised Fund (DAF), Qualified Charitable Distribution (IRA), or Stock please use the address above and confirm Komen's EIN 75-1835298, POC Trish Davis 972.701.2171 or tdavis@komen.org
You may also visit Komen.org/individualgiving for online tools