



Team: **Message for a Cause**
Supporter ID: **265444602**
Event ID: **304556**

Offline Donation Form

First Name: _____ **Last Name:** _____

Address: _____ **City, State:** _____ **Zip:** _____

Email _____ **Would you like to be included in our mailing list? Y/N**

Please mark the box corresponding to your donation commitment:

- | | | |
|--|--|---|
| <input type="checkbox"/> Honorary Pledge \$1,000 | <input type="checkbox"/> Inspiration \$250 | <input type="checkbox"/> Spirit \$50 |
| <input type="checkbox"/> Commitment \$500 | <input type="checkbox"/> Encouragement \$100 | <input type="checkbox"/> Heart (Other amount) |

Please choose one form of payment:

Check Check Number: _____ Check Date: _____

Please write the participants name on your check. Make checks payable to **Autism Speaks**

Credit Card Card Number: _____ CID (on back of card): _____
Card Expiration: ___ Year (yyyy): ___ Card Type: _____

PLEASE MAIL ALL DONATIONS TO:

Autism Speaks
5455 Wilshire Blvd, Ste 2250
Los Angeles, CA. 90036-4272

Donation Receipt

Please retain the bottom portion of this form for your tax records. Thank you for supporting the Walk Now for Autism participant and Autism Speaks.

Autism Speaks is committed to promoting and funding research with direct clinical implications for treatment and a cure for autism. With your support, we are one step closer!

Donations are tax deductible to the fullest extent allowed by law. 501 (C) Number: 20-2329938

Donation Amount: _____

Date _____

Check Number: _____

Card Type _____