



MAIL-IN DONATION FORM

Thank you for making a donation to Special Olympics Minnesota! Your gift is a meaningful way to make a positive impact in the lives of people with intellectual disabilities.

GIFT INFORMATION

Donation Amount (US\$): \$30 \$60 \$100 \$250 \$500 Other \$ _____

Name _____ (OPTIONAL) Business Name _____

Address _____ City _____ State _____ ZIP Code _____

Country _____ Email Address _____ @ _____

(OPTIONAL) Please provide your phone number so we can reach you, if necessary, with questions regarding your donation.

Phone Number _____ - _____ - _____

My donation is enclosed. (Please make checks payable to Special Olympics Minnesota.)

Please charge my:     in the amount of \$ _____

Credit Card Number _____ CSC Code _____ Expiration Date _____

Name on Card _____ Signature _____

I WOULD LIKE TO LEARN MORE ABOUT (OPTIONAL)

Please check all that apply:

- My company will match my gift. Please contact me about matching gifts.
- Please contact me about paying my contribution with stock.
- Please send me more information about The Champions Fund, Special Olympics Minnesota's endowment fund.
- Please send me a free guide to help organize my estate plan.

Special Olympics is exempt under Section 501(c)(3) of the IRS and this gift is tax deductible. Federal Tax ID # 41-1228157

QUESTIONS?

Contact Michele Bardwell
Senior Giving Manager
763.270.7181
Email: michele.bardwell@somn.org

MAIL TO:

Special Olympics Minnesota
900 2nd Ave S, Suite 300
Minneapolis, MN 55402
Phone: 612.333.0999
Fax: 612.333.8782