



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 _____

Would you like to dedicate this donation?

No

Yes, in honor of _____

Yes, in memory of _____

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

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