Mail-In Donation Form

Donor Information

Name: __________________________________________
Address: ______________________________________
City: __________________ State: ______ ZIP: ______
Email Address: _____________________________ Phone: ________________

Donation Information

Please do not send cash. Make checks payable to: National Kidney Foundation

☐ Check/Money Order
☐ Credit Card (please check card type)
   ☐ MasterCard® ☐ Visa® ☐ American Express® ☐ Discover®

Donation Amount: $_________________
Credit Card #: ____________________ Expiration: ________ CVV: _________
Name on Card: __________________________ Signature: ____________________

Fundraiser

Fundraiser/Team Name: Suzanne Thomas ___________________________ The Rolling Kidney Stones
 Participant ID: 2558661 Event ID: 9282

Please mail donations to:

National Kidney Foundation
4801 Woodway Drive
Houston TX 77056

National Kidney Foundation is exempt under section 501(c)(3) of the Internal Revenue Code making this gift tax-deductible.