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: Sharon Bloom __________________________________________ Mini Melty the Magnificent Bean
Participant ID: 2995810 ___________ Event ID: 9314 __________________

Please mail donations to:

National Kidney Foundation
1040 Woodcock Road Suite 119
Orlando FL 32803

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