

# 2013 DONATION FORM

# Margie Dowens

Name of Participant You're Sponsoring

For Official Use Only

Participant ID: 3268870

Event ID: 1818

**TAX ID NUMBER FOR SUSAN G.  
KOMEN FOR THE CURE®: 75-1835298**

## IMPORTANT INFORMATION

- Send only one check per donation form and only one donation form per check.
- Please make all checks payable to “Susan G. Komen 3-Day®” and write the Participant ID number on the memo line.
- All donations are non-refundable and non-transferable.
- All donations are tax deductible to the extent allowed by law.
- Donations cannot be split amongst participants or teams.
- We cannot accept cash donations. Please convert cash to a money order or check.
- We can no longer accept credit card donations via mail. Please visit our website at [The3Day.org](http://The3Day.org) or call us at 800-996-3DAY to make a donation with a credit card.
- International checks and international money orders are not accepted via mail. Please visit our website at [The3Day.org](http://The3Day.org) to make an international donation.
- Please mail this donation form and your check by USPS, not via FedEx or other delivery methods.

## 1. COMPLETE YOUR DONOR INFORMATION.

[illegible]

FIRST NAME

[illegible]

MAILING STREET ADDRESS

[illegible]

STATE

ZIP

PHONE

[illegible]

**DONOR EMAIL ADDRESS** (If an email address is provided you will receive a receipt via email. The Susan G. Komen privacy policy is available at [komen.org](http://komen.org).)

[illegible]

LAST NAME (For corporate donations, write company name in the last name field.)

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SUITE/APT. NO.

[illegible]

CITY

- ☐ I would like more information about how to apply for a matching gift.
- ☐ Do not add me to your contact list. (You still must provide your contact information in order to receive a receipt for your donation.)
- 2. CHOOSE YOUR LEVEL OF DONATION\***

## 2. CHOOSE YOUR LEVEL OF DONATION.\*

- ☐ \$35 (Could be used to provide the cost of patient transportation to a treatment session.)
  - ☐ \$60 (Could be used to support a Komen 3-Day walker for her/his 60-mile journey.)
  - ☐ \$120 (Could be used to provide the cost of a life-saving mammogram.)
  - ☐ \$250 (There are 2.5 million breast cancer survivors in America.)
  - ☐ \$585 (The average 3-Day® walker will walk 585 miles while training.)
  - ☐ \$1150 (Get your 3-Day walker halfway to their fundraising goal.)

Enter an amount that's meaningful for you.

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### 3. ATTACH CHECK.

Please remember to attach only one check per donation form.

Contributions to Komen are tax deductible to the fullest extent permitted by law. Please check with your personal tax advisor regarding the deductibility of your gift.

**CONTACT US:** To register or for more information about the 3-Day, including state-specific financial disclosures, call 800-996-3DAY or visit [The3Day.org](http://The3Day.org).

**MATCHING GIFTS:** Many companies provide their employees with matching gifts. After you make your donation, mail your matching gift form along with a copy of your 3-Day donation receipt to: Susan G. Komen 3-Day, 820 W. Jackson Blvd., Suite 800, Chicago, IL 60607. For online matching gift program instructions, please visit the Matching Gifts page on [The3Day.org](http://The3Day.org).

**\*ABOUT SUSAN G. KOMEN FOR THE CURE:** Seventy-five percent of the net proceeds raised by the Susan G. Komen 3-Day help support national research and large public health outreach programs. The remaining 25 percent supports local community and affiliate outreach programs. Virtually every major advance in the fight against breast cancer in the last 30 years has been impacted by a Susan G. Komen grant. For more information about Komen, breast health or breast cancer, visit [www.komen.org](http://www.komen.org).

**BE A HERO—TELL AS MANY WOMEN AS POSSIBLE ABOUT THE LIFESAVING BENEFITS OF EARLY DETECTION AND TREATMENT OF BREAST CANCER.**

Thank you for supporting the fight to end breast cancer.