



OFFLINE DONATIONS

Your First Name: _____ Your Last Name _____

Team Name: _____

Walk Location: _____

Collect donations from supporters in an envelope before the event. Please complete this form and mail checks and credit card donations to: SBA/Walk-N-Roll 1600 Wilson Blvd. Ste. 800 Arlington, VA 22209 **or** turn in this form and all collected donations when you check in at the walk. Cash donations must be turned in at the walk and cannot be accepted via mail.

DONOR NAME	DONOR ADDRESS	CITY, STATE, ZIP	AMOUNT
<i>CASH DONATIONS:</i>			
			\$
			\$
			\$
			\$
			\$
			\$
<i>CREDIT CARD DONATIONS:</i>		<i>TOTAL CASH</i>	\$
			\$
			\$
			\$
			\$
			\$
<i>CHECK DONATIONS:</i>		<i>TOTAL CREDIT CARDS</i>	\$
			\$
			\$
			\$
			\$
		<i>TOTAL CHECKS</i>	\$
			\$
			\$
Total enclosed with this form:			\$