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19 Fair Street
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www.racewithpurpose.org

Donation Form

Are you donating to a team member's fund-raising effort? **yes** **no**
(check box yes or no)

If yes, please print team member's name _____

Donor Information

(please print)

Donor Name _____

Address _____

City, State, Zip _____

E-mail _____

Daytime Telephone Number _____

Contribution Level

\$1,000 \$500 \$100 \$50 Other Amount _____

Company Matching

My Company will match my contribution *(please include form)*

Payment Information

Please make checks payable to **Race with Purpose/the Robert H. Lorsch Foundation**

Mail to:

Race with Purpose
c/o ABS
19 Fair Street
Carmel, NY 10512

Questions?

E-mail info@racewithpurpose.org or call 888.761.5999

All donations are 100% tax deductible.

We thank you for your support!