



DONATION FORM

PLEASE MAIL THIS FORM WITH YOUR DONATION TO:

UMPS CARE CHARITIES
301 HOLLY ROAD
EDGEWATER, MD 21037

- All donations are tax deductible to the extent allowed by law. UMPS CARE Charities Tax ID: 20-4150440.
- Anyone who includes an e-mail address will receive a receipt via e-mail.
- All donors making donations of \$100 or more will receive a tax-receipt. Donors making donations of less than \$100 may also request a tax-receipt.
- Donations can be split amongst multiple participants. Please include all participant names on this form.

UMPS CARE CONTACT:

GROUP AFFILIATION:

DONOR CONTACT INFORMATION

FIRST NAME MI LAST NAME COMPANY

MAILING STREET ADDRESS SUITE/APT. NO

CITY STATE ZIP COUNTRY

E-MAIL ADDRESS (FOR TAX RECEIPT) DAY PHONE

DONOR INFORMATION

\$ _____
AMOUNT

☐ CHECK **PLEASE MAKE PAYABLE TO "UMPS CARE CHARITIES". WRITE PARTICIPANT NAME ON ALL CHECKS**

☐ CREDIT ☐ TYPE: ☐ AMEX ☐ VISA ☐ MC

CREDIT CARD NUMBER EXPIRATION DATE CVV#

SIGNATURE FOR ALL CREDIT CARDS