

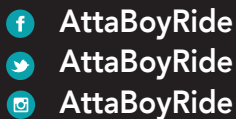


FORM DONATION AUGUST 13, 2016 EAGAN, MN

Donate securely and quickly online at www.AttaBoyRide.org

Or, mail this form with your donation to:
AttaBoy Ride
P.O. Box 464
Rosemount, MN 55068

www.AttaBoyRide.org



NAME OF PARTICIPANT YOU'RE SUPPORTING _____

PARTICIPANT # *(if known)* _____

Fill in the following information. Please print clearly. Do not send cash. Donations are tax deductible (Charity Events of Minnesota, Tax ID#: 20-8160744). Donations are non-refundable and non-transferable regardless of participation in the AttaBoy Ride. We do not sell or share contact information!

PERSONAL INFORMATION

Name of Donor _____

Additional Donor Name (if joint gift) _____

Company name (for corporate donations only) _____

Billing Address _____

City _____ State _____ Zip _____

Phone number: (_____) _____ - _____

Email: _____

- Yes. List my donation as "Anonymous" on the website (participant will still see your name).
- Yes. Hide my dollar amount from the website (participant will still see amount).

DONATIONS

Monthly payments must be made on a credit card. If your company offers matching gifts for employee donations please include their matching gift form with this donation form. When payment is received, matching gifts will count towards participant's personal fundraising goal.

Please select one:

- | | | |
|--------------|--------------------------------------|------------------------------------------------------|
| \$500 | <input type="checkbox"/> Pay in full | <input type="checkbox"/> 5 monthly payments of \$100 |
| \$250 | <input type="checkbox"/> Pay in full | <input type="checkbox"/> 5 monthly payments of \$50 |
| \$125 | <input type="checkbox"/> Pay in full | <input type="checkbox"/> 5 monthly payments of \$25 |
| \$60 | <input type="checkbox"/> Pay in full | <input type="checkbox"/> 3 monthly payments of \$20 |
| \$35 | <input type="checkbox"/> Pay in full | <i>(not applicable)</i> |

Or choose your donation amount:

- \$ _____ Pay in full _____ monthly payments of \$ _____
(Monthly payments must be at least \$10 and cannot exceed 5 months.)

THREE PAYMENT OPTIONS *(Do not send cash.)*

Check Check Number _____

Make checks payable to "AttaBoy Ride".

Pay in Full Credit Card

Monthly Payments from Credit Card

I authorize my bank to transfer the amount shown above from my credit card each month, for the period specified above, directly to Charity Events of Minnesota (the nonprofit organization that produces the AttaBoy Ride). I understand that a record of each charge will be included in my monthly bank statement and will serve as my receipt. This authority will expire when my donation has been paid in full.

- Visa MasterCard Discover American Express

Account Number _____

Exp Date _____ / _____ Signature _____

(Billing on your credit card statement will appear as AttaBoy Ride.)