



Please accept my donation in support of the Clean Air Challenge - Alaska!

Participant's Name: _____

Team Name (if applicable): _____

Gifts to the Team **will not** go towards the individual team member's fundraising

Donation Amount: \$500 \$250 \$100 \$50 \$25 Other \$ _____

Paid By: Check-CK#: _____ Credit Card (see below) Cash (not recommended to send though the mail)

Donor Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Credit Card Information:

(Credit Card Number) (Exp. Date-00/00) (CVV#) (Type-Visa, MC, AmEx, Disc)

(Name as it appears on card) (Authorizing Signature)

If Paying By Check - Make check payable to the American Lung Association(ALA)

Thank you so much for your contribution!

Mail this form with your payment to:

**Clean Air Challenge - Alaska
American Lung Association
5601 6th Ave S Ste 460
Seattle, WA 98108**

Additional Information

Thank you for your donation to the American Lung Association. The American Lung Association hereby states that this organization is tax-exempt under IRS code Section 501(c)(3), Tax number: 13-1632524, and that no gifts or benefits have been given as a result of this donation. Please retain a copy of this receipt for your records, as it is important documentation necessary for any federal income tax deduction for this contribution.