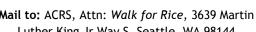


## Offline **Donation Form**



| Donor Name                                  |                            |          |
|---|----------------------------|----------|
| Address                                     |                            |          |
| City, State, Zip                            |                            |          |
| Phone                                       |                            |          |
| Email Address                               |                            |          |
| Walker's Name (If sp                        | onsoring someone           | )        |
| ` •   |                            |          |
|   | -<br>kind, like rice or ra | amen)    |
| Donation Item (If in-<br>Donation Amount/Va |                            |          |
| Donation Item (If in-<br>Donation Amount/Va |                            |          |
| Donation Item (If in-                       | Yes Yes                    | No<br>No |

Signature

THANK YOU FOR HELPING FIGHT HUNGER AND SUPPORTING THE ACRS FOOD BANK!

**Credit Card Number** 

**Expiration Date** 



**Donor Name** 

## Offline **Donation Form**

Mail to: ACRS, Attn: Walk for Rice, 3639 Martin Luther King Jr Way S, Seattle, WA 98144

| Address                               |                             |                    |
|---------------------------------------|-----------------------------|--------------------|
| City, State, Zip                      |                             |                    |
| Phone                                 |                             |                    |
| Email Address                         |                             |                    |
| Walker's Name (If                     | sponsoring some             | eone)              |
| Donation Item (If in                  | n-kind, like rice           | or ramen)          |
| Donation Amount/                      | Value: \$                   |                    |
| Cash Enclosed?                        | Yes                         | No                 |
| Check Enclosed? (Make checks out to V | Yes<br>Valk for Rice, cc: v | No<br>walker name) |
| Credit Card: Visa                     | MCard Amex                  | Other:             |
| Credit Card Numbe                     | <u></u>                     |                    |
| Expiration Date                       | Signatur                    | e                  |
| THANK YOU FO                          |                             |                    |



## Offline **Donation Form**

Mail to: ACRS, Attn: Walk for Rice, 3639 Martin Luther King Jr Way S, Seattle, WA 98144

| Address                                   |                             |                   |
|---|-----------------------------|-------------------|
| City, State, Zip                          |                             |                   |
| Phone                                     |                             |                   |
| Email Address                             |                             |                   |
| Walker's Name (If sp                      | oonsoring some              | one)              |
| Donation Item (If in-                     | kind, like rice o           | r ramen)          |
| Donation Amount/Va                        | alue: \$                    |                   |
| Cash Enclosed?                            | Yes                         | No                |
| Check Enclosed?<br>(Make checks out to Wa | Yes<br>alk for Rice, cc: wa | No<br>Ilker name) |
| Credit Card: Visa /                       | MCard Amex C                | Other:            |
|   |                             |                   |
| Credit Card Number                        |                             |                   |