

# COPS Walk 2008

## CREDIT CARD DONATION SLIP

Donor's Name: \_\_\_\_\_ Telephone # \_\_\_\_\_  
(exactly as it appears on credit card) (including area code)

Donor's Mailing Address: \_\_\_\_\_  
(City) (State) (Zip)

Card Type – circle one:    MasterCard                  VISA  
Card # ---  
Expiration date: -

<b>Walker's Name:</b> _____ _____
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Amount donated:  
\_\_\_ \$250 (\$10 per mile)    \_\_\_ \$100 (\$4 per mile)    \_\_\_ \$50 (\$2 per mile)    \_\_\_ \$25 (\$1 per mile)    \_\_\_ Other \$ \_\_\_\_\_

Authorizing Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

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