



credit card donation slip

2007 Challenge Walk Crew Member Information:

Team: Team Greykell

Name: Maria Stroffolino
Email: maria@britecloth.com
Phone: (240) 683 4602
Fax: (202) 895-8923

Address: 9519 Treyford Terrace
Montgomery Village, MD 20886

Fax or mail this form to me and I'll forward it to the National MS Society.

Doner's Name: _____
(print exactly as it appears on the card)

Credit Card Number: _____

Expiration Date: ___/___ AmEx, Discover, Master Card, Visa

AMT: \$500, \$200, \$100, \$50, \$25, Other: _____

Sign Here: x _____
AUTHORIZATION SIGNATURE

Billing address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

E-Mail: _____



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