

TEAM USO

CHECK DONATION FORM

In order for the team member's fundraising campaign to be properly credited, each donation via check must be accompanied by this form. Please complete this form and write the team member's name in the "memo" section of your check.

Upon receipt, your donation will be entered on the team member's online donation Web page.

Donor Information

| First Name: | Last Name: | |
|--|------------------|------|
| E-mail: | | |
| Address: | | |
| City: | State: | Zip: |
| Name of team member donation should be credited to: | | |
| Donation Details Please select one of the following options: ☐ Make my donation public (name and dor ☐ Make my donation anonymous (name hi ☐ Hide my donation amount (name shown | dden, amount sho | • |
| Make check payable to the USO and mail to |) : | |

Attn: Emily Farwig 2111 Wilson Boulevard, Suite 1200

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