



## PieceWalk Offline Donation Form

My contribution is supporting TEAM \_\_\_\_\_

Donation Amount \$ \_\_\_\_\_ Check Number \_\_\_\_\_

Please Make Checks Payable to AutismOklahoma.org (Please do not staple or tape checks to this form)

Full Donor Name \_\_\_\_\_

Street Address \_\_\_\_\_

City State Zip \_\_\_\_\_

E-mail\* \_\_\_\_\_

Phone \_\_\_\_\_

Signature \_\_\_\_\_

Mail this form and your check (please do not send cash) to:

AutismOklahoma.org  
Attn: PieceWalk  
PO Box 7747  
Edmond, OK 73083

\*An electronic receipt is automatically generated for all donations and sent to the email address provided. The IRS will accept a canceled check as a receipt for all donations under \$250.  
AutismOklahoma's Tax ID# is 26-0807671.

**Thank you for your contribution!**