

MAIL-IN DONATION FORM

Please print out this form.

DONOR INFORMATION

(First Name and Last Name): _____

Organization Name (Fill this out only if you're making your donation on behalf of an organization):

ADDRESS INFORMATION (Donor or Company Address) :

City: _____ State: _____ Zip Code: _____

Country: _____ Email: _____ Telephone Number (optional): _____

PAYMENT OPTIONS

One Time Gift Amount: _____

I'm enclosing my check made payable to: Baltimore Office of Promotion & The Arts, Attention of Eddie Scott-Development Officer, 10 East Baltimore Street 10th Floor, Baltimore, MD 21202.

Please charge my credit/debit card:

Visa Mastercard American Express Discover

Cardholder's Name: _____

Card Number: _____

Expiration Date: Month _____ Year _____ ccv _____

I WANT TO SUPPORT

Please designate your gift to one of the following:

Community Arts Programming Community Arts Events/Festivals BOPA: Greatest Area of Need

For any questions or feedback, please call 410-752-8632 or email Eddie Scott at escott@promotionandarts.org