

Please send in your donation with this form to:

Newsday Charities Kids Campaign Processing Center 25257 Network Place Chicago, IL 60673-1252

Personal Information:			
Prefix First	M.I	Last	Suffix
Spouse Information			
Prefix First	M.I	Last	Suffix
Is this donation on behalf of an organization	? □ Yes □ No	Org. Name	
Street Address			Apt./Unit
City		State Zi	p
Phone ()	Email		
<u>Donation Information:</u>			
I would like to make a gift in the amount of:	\$		
Enclosed is my check payable to <i>Ne</i>	wsday Charities		
Please charge my:	☐ MasterCard	□ Discover	☐ American Express
Card Number		_ Exp Signature _	
I would like to make this a recurring gi	ft. Charge my credit ca	ard \$ on the first Monda	ay of every month until further notice.
Have you included an employer matching gift form? □ Yes		□ Yes □ No	
Donation Acknowledgment			
You can choose to make your gift a tribute to	a person you know o	r admire.	
Please make my gift: In honor of In memory o			
If you would like this individual or his/her fan information below.	nily to receive a letter f	rom Newsday Charities recogr	nizing your gift, please include the
Your name and donation may be listed in ful	•		
☐ Yes, publish my name as:☐ No, do not publish my info			

The Kids Campaign is conducted by Newsday Charities, a Robert R. McCormick Foundation Fund. The Foundation is a registered 501(c)(3) organization, IRS registration # 36-3689171. Your gift is tax deductible to the extent allowed by law. A written acknowledgment will be sent for your records. A copy of the latest annual report may be obtained from the organization by calling 312-445-5044 or from the Charities Bureau, Department of Law, 120 Broadway, New York, NY 10271. The Robert R. McCormick Foundation and Newsday respect your right to privacy and do not trade or sell donor names.