

DONATION SUBMISSION INSTRUCTIONS

The Crohn's & Colitis Foundation has all donations sent to our headquarters. The labels should read:

Team Challenge – National Team

Crohn's & Colitis Foundation

Attn: Dan Bruno

733 Third Ave, Suite 510

New York, NY 10017

Attached is the two-part Donation Submission Form, which you will complete and send in to the Crohn's & Colitis Foundation office with your donations. Please remember to write clearly and legibly when filing out submission forms.

- Page One: This is a summary page that identifies you, your chapter (National), the event you are participating in, and gives a total of the donations enclosed.

In order to effectively process your contributions and to ensure accurate and timely postings to your account, it is important that you closely follow the instructions outlined below.

- 1) **Cash Contributions:** **DO NOT SEND CASH!** The Foundation will not be liable for any lost or stolen cash donations.
- 2) **Check Contributions:** Enclose your checks with page one of the Donation Submission Form and mail to the National Office address using labels provided by your Chapter. Checks must be made payable to Crohn's & Colitis Foundation.
 - **DO NOT: STAPLE OR TAPE CHECKS.**
 - **DO NOT: SEND DONOR FORMS OR PLEDGE CARDS TO THE PROCESSING CENTER.**
 - **DO NOT: SEND POSTDATED CHECKS-** submit these when the check date is valid.
 - **DO NOT: SEND CHECKS DATED 6 MONTHS OR OLDER-**these checks will not be accepted by the bank and will be returned. It is important to send in your donations in a timely manner.
- 3) **Donation Reports**

It takes two to three weeks for offline donations to arrive, be processed and credited to you.

CHECK DONATION SUBMISSION FORM

IMPORTANT: You must enclose this form with every batch of funds you submit to the national office. Without this identification, we will not be able to credit these funds toward your fundraising goal.

Step 1: Fill out this form below

Participant Name: _____

Team Challenge Manager: Kat Gunsur Smith

Please write your race or event name below

Participant Address: _____

City: _____ State: _____ Zip: _____

Participant
Email: _____

Step 2: Summarize your enclosed donations.

# of Donations Enclosed	Payment Type	TOTAL AMOUNT
_____	Checks/Money Order	\$ _____

Step 3: Make copies of all checks.

- 1 for your records
- 1 for your endurance manager. Email this copy to your Endurance manager so they can credit the donations on to your website.

Step 4: Mail this form and all checks to the National Office.