



## FSMTB MAIL-IN DONATION FORM

NAME	FIRST	M.I.	LAST
ORGANIZATION (if applicable)			
MAILING ADDRESS	STREET	APT. #	
CITY	STATE	ZIP	
EMAIL ADDRESS			
DAYTIME PHONE		CELL PHONE	

### CORRESPONDENCE

Would you like to receive electronic updates about the FSMTB?	<input type="checkbox"/> YES I would like to be added to the FSMTB Email list.	<input type="checkbox"/> NO
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### DONATION

The FSMTB is exempt under Section 501(c)(3) of the Internal Revenue Code, making this gift tax deductible.

I wish to remain anonymous; please keep my donation confidential.

Enclosed is my gift of \$ \_\_\_\_\_ (Please make check payable to FSMTB.)

Please charge my credit card for \$ \_\_\_\_\_

Visa     MasterCard

CREDIT CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

NAME ON CREDIT CARD \_\_\_\_\_

CARDHOLDER SIGNATURE \_\_\_\_\_

### PLEASE RETURN THIS FORM TO

FSMTB  
7111 W. 151<sup>ST</sup> Street, Suite 356  
Overland Park, KS 66223

Questions? Call 1.888.70FSMTB (1.888.703.7682) or Email [info@fsmtb.org](mailto:info@fsmtb.org)