Saturday, Nov. 7, 2020
Check Tracking Form
mdanderson.org/bootwalk

TEAM NAME

WALKER’S FIRST NAME

WALKER’S LAST NAME

ADDRESS

CITY, STATE, ZIP

EMAIL ADDRESS

Make checks payable to:
MD Anderson Cancer Center
Please do not mail cash. Cash must be converted to a money order.

Include bwh20 and your name in the memo portion of your collected checks to ensure you get credit for your fundraising efforts.

Mail this form with checks to:
MD Anderson - Boot Walk
P.O. Box 4470
Houston, Texas 77210-4470

DONOR NAME | CHECK # | AMOUNT | DONOR NAME | CHECK # | AMOUNT
--- | --- | --- | --- | --- | ---
1. | | $ | 6. | | $
2. | | $ | 7. | | $
3. | | $ | 8. | | $
4. | | $ | 9. | | $
5. | | $ | 10. | | $

TOTAL $ 

☐ CHECK HERE IF YOU HAVE ENTERED THESE OFFLINE DONATIONS ONTO YOUR PERSONAL WEBPAGE ON THE BOOT WALK WEBSITE.

For internal use only:
Participant name:
Event name: Boot Walk to End Cancer® – Houston
Solicitation Code: bwh20  ID (P2PCONV):