



# United States Soo Bahk Do<sup>®</sup> Moo Duk Kwan<sup>®</sup> FOUNDATION, Inc

20 Millburn Avenue, Floor 2  
Springfield, New Jersey 07081  
501(c)(3) Non-Profit  
TAX EXEMPT STATUS APPROVED

## PERSONAL INFORMATION

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First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## DONATION FREQUENCY

## DONATION AMOUNT

☐ One-time Donation

☐ \$10

☐ \$25

☐ \$50

☐ Recurring Donation (Monthly/Annually)

☐ \$100

☐ \$250

☐ \$500

☐ Other \$ \_\_\_\_\_

## DONATION DETAILS

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☐ Check Enclosed

☐ Credit Card # \_\_\_\_\_ EXP \_\_\_\_\_ CCV \_\_\_\_\_

☐ [Click Here to Donate Online](#)

## RECEIPT AND ACKNOWLEDGMENT

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☐ I would like to receive a receipt for tax purposes.

☐ Please acknowledge my donation publicly.

*I hereby confirm the donation details provided above.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Title

*\*By submitting this donation, I confirm that I am the account holder and authorize the United States Soo Bahk Do Foundation to charge the specified donation amount to the provided payment method.*