



2025 Legapalooza Individual Donation form

Contributor information (Please Print)

Contact _____ E-Mail _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

If you would like Tax Deduction information mailed or faxed to you, please pay by
Check or Money Order. Please check here if required. _____

Amount of Donation \$ _____

****Please make Check or Money Order out to The Dallas Amputee Network.****

Credit Card # _____ Exp. _____ Code _____

Please mail to:
Legapalooza
Tommy Donahue
5645 S.M.U. Blvd.
Dallas, TX 75206

More info @ Legapalooza.com



5645 SMU BLVD. ★ Dallas, TX 75206 ★ TstumpyD@att.net ★ 214.641.6833

WWW.LEGAPALOOZA.COM

