Please Do Something!

Please accept my supplemental pledge of \$	to the
Signed	
Date	
I would like to pay in the same manner as my original	pledge
I would like to pay the additional amount in another ma	
	(how)
In respect for your confidentiality, EACH MEMBER is asked form in the envelope whether you fill the form out or leave Everyone is asked return them. Thanks for caring!	•
(Please return form to Sheri Novak, Business Administrator	·)