

Photocopy sheet, if additional space is required – NOTE: A tax receipt will be given upon request for pledges over \$10. Full addresses and postal codes are required for a tax receipt to be issued.

Please print your information

Sponsor's Name:	Tel:	Total amount Pledges	Check off when paid	Receipt requested
Full Mailing Address:				
Email Address (optional):				

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TOTAL AMOUNT OF PLEDGES FOR SCLERODERMA				
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