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FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YES, I WILL MAKE A DIFFERENCE.

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Please indicate distribution amounts.

PAYMENT INFORMATION

Total pledge amount \$_____

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Contribute by phone by using a Credit/Debit Card.

Please call Jennifer Champine at (313) 223-2632

Contribute by mail:

YMCA of Metropolitan Detroit

Mission Resources

1401 Broadway, Suite 3A

Detroit, MI 48226

Please contact me to schedule an installment payment plan.

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I am interested in supporting the Y through my will/estate plans.

My company will match my gift.

Company Name _____

Please submit form with pledge.

Signature _____ Date _____

**Please email this complete pledge card to Jennifer Champine our
Contribution Systems Manager to jchampine@ymcadetroit.org**