

STRIDES FOR STROKES

PLEDGE SHEET

PLEASE PRINT

(receipts issued for donations over \$20, unless requested AND receipts issued to clearly printed pledges ONLY)

| | | | | | | | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
| CITY | | PC | | | | Phone # | | PLEDGE | \$ | | |

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| NAME | | | | | | ADDRESS/ APT# | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
| CITY | | PC | | | | Phone # | | PLEDGE | \$ | | |

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| NAME | | | | | | ADDRESS/ APT# | | | | | |
| CITY | | PC | | | | Phone # | | PLEDGE | \$ | | |

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| NAME | | | | | | ADDRESS/ APT# | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
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| NAME | | | | | | ADDRESS/ APT# | | | | | |
| CITY | | PC | | | | Phone # | | PLEDGE | \$ | | |

TO REACH OUR GOAL, WE HOPE EACH PARTICIPANT FINDS 10 SPONSORS! PRIZES FOR TOP 3 PLEDGE \$\$ RAISED!!!

| | | | | | | |
|---------------------|-----------------------|----|--------------|--|-------|--|
| FOR OFFICE USE ONLY | TOTAL AMOUNT RECEIVED | \$ | Verified by: | | Date: | |
|---------------------|-----------------------|----|--------------|--|-------|--|

| | |
|-----------------------------|-----------|
| Total Amount on this page | \$ |
| Total Amount from 2nd page | \$ |
| TOTAL AMOUNT PLEDGED | \$ |