



# LEAP 1% Scholarship Fund Individual Pledge Card



Name \_\_\_\_\_

Business/Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Bus. Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

**Make checks payable to:**  
Sea Mar CHC  
c/o LEAP1% Fund  
1040 S Henderson Street • Seattle, WA 98108

**Contribute Online:**  
[http://www.seamar.org/donations\\_form.php](http://www.seamar.org/donations_form.php)  
[www.seamar.org](http://www.seamar.org)

**Check one or more below:**

- I pledge to contribute and/or raise \$ \_\_\_\_\_. This meets the criteria as a LEAP1% donor. (You will receive materials to help you meet your pledge.)
- Enclosed is my contribution \$ \_\_\_\_\_. Any amount is welcome.
- I pledge to contribute \$ \_\_\_\_\_. I will make \_\_\_\_ (# of) payments prior to December 31, 2011, to reach the amount pledged.

**The LEAP1% Scholarship Fund is an initiative of Sea Mar Community Health Centers, a tax-exempt, 501 (c) 3, organization.**



# LEAP 1% Scholarship Fund Individual Pledge Card



Name \_\_\_\_\_

Business/Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Bus. Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

**Make checks payable to:**  
Sea Mar CHC  
c/o LEAP1% Fund  
1040 S Henderson Street • Seattle, WA 98108

**Contribute Online:**  
[http://www.seamar.org/donations\\_form.php](http://www.seamar.org/donations_form.php)  
[www.seamar.org](http://www.seamar.org)

**Check one or more below:**

- I pledge to contribute and/or raise \$ \_\_\_\_\_. This meets the criteria as a LEAP1% donor. (You will receive materials to help you meet your pledge.)
- Enclosed is my contribution \$ \_\_\_\_\_. Any amount is welcome.
- I pledge to contribute \$ \_\_\_\_\_. I will make \_\_\_\_ (# of) payments prior to December 31, 2011, to reach the amount pledged.

**The LEAP1% Scholarship Fund is an initiative of Sea Mar Community Health Centers, a tax-exempt, 501 (c) 3, organization.**