



Your support really does make a difference. Thank you!

CONTRIBUTOR (TO WHOM GIFT IS CREDITED)

CONTACT NAME (IF DIFFERENT FROM ABOVE)

ORGANIZATION/FIRM

EMAIL

ADDRESS

CITY/STATE/ZIP

DAYTIME PHONE

\$1,000 \$500 \$250 \$100 \$50 SURPRISE US! \$ _____

I WANT TO JOIN THE MORE THAN 1,000 ATTORNEYS GIVING \$275 OR MORE PER YEAR! \$ _____

CHECK ENCLOSED
MAKE PAYABLE TO:
LEGAL AID OF WESTERN MISSOURI

PLEASE CHARGE MY:

AMEX MC VISA

THIS IS A TRIBUTE GIFT

CARD NUMBER

NAME ON CARD

EXPIRATION DATE

SIGNATURE

NAME: GIFT IS IN HONOR/MEMORY OF (CIRCLE ONE)

PLEASE NOTIFY THE FOLLOWING:

NAME

ADDRESS

CITY/STATE/ZIP

LEGAL AID OF WESTERN MISSOURI IS A 501(C)(3)
CORPORATION & YOUR CONTRIBUTIONS ARE TAX DEDUCTIBLE.

MAIL TO: LEGAL AID OF WESTERN MISSOURI, 4001 BLUE PARKWAY, SUITE 300, KANSAS CITY, MO 64130