



NATIONAL OFFICE PRODUCTS INDUSTRY

Legions of Hope

PERSONAL GIVING CLUB

• MEMBERSHIP PLEDGE •

Name _____

Title _____

Company _____

Address _____

City _____

State/Zip _____

Phone _____

Fax _____

E-Mail _____

Pledge Amount \$ _____
(Minimum Annual \$300 Pledge)

Check payable to City of Hope/NOPI

Mail to: City of Hope - NOPI
1055 Wilshire Boulevard
Los Angeles, CA 90017

FAX to: (213) 241-7106
Register Online: www.cityofhope.org/nopi