



## **NATIONAL OFFICE PRODUCTS INDUSTRY PERSONAL GIVING OPPORTUNITIES**

### **• MEMBERSHIP PLEDGE •**

Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

- LEGIONS OF HOPE - \$300
- FRIENDS FOR HOPE - \$1,000
- ADVANCE DIABETES RESEARCH - \$25,000  
(\$5,000 X 5 YEARS OPTIONAL)
- OTHER AMOUNT \_\_\_\_\_

### **• FORM OF PAYMENT •**

- CHECK
- CREDIT CARD # \_\_\_\_\_  
expiration date \_\_\_\_\_

- PLEDGE
- ONLINE at [www.cityofhope.org/nopi](http://www.cityofhope.org/nopi)

\$ \_\_\_\_\_ TOTAL

- ANNUAL RENEWAL

*By selecting this box City of Hope will automatically renew your payment or pledge total.*

