

I want to make a PLEDGE to support LEAP on Give Miami Day 2020!

The following is my tax-deductible donation payable to LEAP (minimum donation is \$25).

- \$14,000 \$7,000 \$5,000 \$2,500 \$1,000 \$500 \$100
 \$50 Other _____

Card Holder Name: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Are you a first-time donor to LEAP? _____

Do you want to cover the third party fee so that LEAP receives your full donation? _____

Is this donation in memory of, in honor of, or on behalf of someone? If so, please share this person's name so we can recognize them properly. _____

I authorize LEAP to charge my credit card for the total amount above on **Give Miami Day 11.19.20**, via the givemiamiday.org website.

Signature: * _____

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