

Show Your Love for the Children Support Dade Legal Aid/Put Something Back

We Need Your Help Now More Than Ever!

	Bar Number:		
Firm/Company:			
Address:		Contac	t:
City: Zip:	E-mail:		
'hone:	Cell:		_Website:
YES! I W	ill Make a Life-Ch	anging Dor	nation to Dade Legal Aid's
	Child A	Advocacy Pr	roject
Below p	lease find my dona	ation to Leg	gal Aid in the amount of:
\$100 Frie	end\$1,000	Silver	\$7,500 Emerald
\$250 Hero	o\$2,500	Gold	\$10,000 Diamond
\$500 Ang	el\$5,000	Platinum	Other \$
MC/VISA#		Exp	
MC/VISA#		Exp	
Card Holder Name: _			
Billing Address and Z	ip Code:		
Payment Amount: \$		Security Nu	umbers (On Back of Card):
Signature:			
	R	ETURN TO:	
	Da	ade Legal Aid	I
12	3 N.W. First Avenue	, First Floor,	Miami, FL 33128 or
	Email to: I	Psb@dadeleg	alaid.org

THANK YOU FOR YOUR SUPPORT!