Chairman's Circle Commitment Form



Yes, I want to become a member of The LSCP Chairman's Circle provides velopment in Marquette County a top pa higher level of success for today and Yes, I would like to discuss this furth Your investment is tax deductible and the success for today.	an opportun priority. Toge the future g her	nity to joir ether we a generation	other vision are creating as to come	onary leader g a greater o	rs making econ capacity and ac	nomic de chieving
Name:					 	
Organization:						
Signature:				_ Date:		
TOTAL Donation Amount: *_ *Minimum commitment of \$^				years.		
Please enroll me immediately a	nd send m	ne an in	voice			
Please enroll me immediately, e	enclosed is	s my che	eck made	payable t	o LSCP Four	ndation
Please charge my credit card:	VISA	MC	DISC	AMEX		
Credit Card #:			EXP:			
Card Holder's Name:						
Address:			V-code	:	o II D >	
You may recognize my donation as _					LS CPER	10 to differ
,,					NITY PART	M