

**Chicago Appleseed Fund for Justice
& Chicago Council of Lawyers
End of Year 2015 \$40,000 Fundraising Match Campaign**

Name: _____ **Mr. /Ms. /Mrs. /Hon. /Dr.**
(Please circle)

Firm/Company/Organization: _____

Street Address: _____

City: _____ **State:** _____ **ZIP:** _____

Phone: _____ **Email:** _____

Yes, I would like to become a member of the Presidents' Circle or renew my membership.

I am giving a charitable contribution of \$5,000.00 ___ \$2,500.00 ___ \$1,000.00 ___ \$500.00 ___

Yes, to continue Chicago Appleseed's and Chicago Council's valuable work, I'd like to give a charitable contribution in the amount of: \$250.00 ___ \$100.00 ___ \$50.00 ___ other amount: \$ _____

Yes, I would like to offer pro bono assistance to Chicago Appleseed or the Chicago Council of Lawyers. Please contact me at the email or phone number above.

Yes, I would like to join the Chicago Council of Lawyers for the special rate of \$60.

*To pay by credit card, you can complete the form below, or pay securely online at:
<http://www.chicagoappleseed.org/get-involved/donate/>*

*Please make checks payable to: Chicago Appleseed Fund for Justice and send it to:
750 N. Lake Shore Drive, 4th Floor Chicago, IL 60611.*

Credit Card Number: _____ **Exp. Date:** _____ **CCV:** _____

Signature: _____ **Date:** _____

**Your donation to Chicago Appleseed Fund for Justice is tax-deductible.
CAFFJ's FEIN is 23-7059214.**