

YES!

I would like to donate to the Foundation!

Please accept my donation of

\$ _____

I would like to apply my donation to:

(Circle one)

General fund
(area of highest need)

Financial needs of
Residents

WSAPD Foundation
Research Grant

Your tax deductible donation, of any amount, is sincerely appreciated!

Name

Mailing Address

Phone

Signature

Donations may be sent to:

WSAPD Foundation
P.O. Box 3307
Renton, WA 98056