

Count Me In as a PPWC Sustaining Member

Platinum (\$10,000) Gold (\$5,000) Silver (\$2,500) Bronze (\$1,000) Other \$ _____

Business Name _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Email _____



**Return Slip and check written to PPWC to PO Box 20809, Lehigh Valley PA, 18002-0809*

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