



**P.O. Box 2067, Minneapolis MN 55402**

**YES! I would like to assist with the MSNP projects. My gift is enclosed.**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

\_\_\_ **I would like my gift to be in honor of** \_\_\_\_\_

\_\_\_ **I would be interested in volunteering. Please call me:** \_\_\_\_\_

**Please e-mail me:** \_\_\_\_\_

\_\_\_ **I would like to receive your period newsletters.**