



# SDI NETWORK WALK FOR JEFF'S PLACE

Saturday, October 21

Name: \_\_\_\_\_

Miles Completed: \_\_\_\_\_

Dear Sponsor,

I am participating in the **SDI NETWORK WALK** for **JEFF'S PLACE**. All proceeds will help fund the comprehensive bereavement services Jeff's Place offers for grieving children and families. You can sponsor me for an amount per mile and can name a maximum amount that you are willing to contribute, or donate the amount you wish to contribute now. If by the mile, I will return after the Walk to tell you how many miles I completed and collect your contribution. Please make checks payable to **JEFF'S PLACE**. All contributions are tax-deductible.

Thank you!

|    | Name of Sponsor | Phone # | Pledge per mile<br>(Example: \$5.00) | Maximum Pledge | Amount Collected from Sponsor |
|----|-----------------|---------|--------------------------------------|----------------|-------------------------------|
| 1  |                 |         |                                      |                |                               |
| 2  |                 |         |                                      |                |                               |
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| 10 |                 |         |                                      |                |                               |
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| 13 |                 |         |                                      |                |                               |
| 14 |                 |         |                                      |                |                               |
| 15 |                 |         |                                      |                |                               |

To contact Jeff's Place: [david@jeffsplacemetrowest.org](mailto:david@jeffsplacemetrowest.org), or 508-879-2800.