

I want to be a...

Harvest Hero



By contributing monthly:

\$100 \$50 \$25 \$10 \$_____ Other amount

*Please make checks payable to **Solid Ground Penny Harvest**, or use your credit card:*

MC VISA # _____ - _____ - _____ - _____ Exp. Date: ____ / ____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Please mail completed form to:

Penny Harvest
c/o Solid Ground
1501 North 45th Street
Seattle, WA 98103-6708

Penny Harvest[®]

a program of **solid ground** 
Building community to end poverty