



**COMMITTED TO
SOCIAL JUSTICE**

Freedom Fund

NAACP San Luis Obispo County Branch

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Contact Name: _____

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Sponsorship Level (please check sponsor level):

_____ Champion: \$5,000

_____ Guardian: \$2,500

_____ Advocate: \$1,000

Total Amount enclosed: _____

Please make checks payable to: NAACP San Luis Obispo Branch
Mail to: 110 S Mary Ave, Suite 2215
Nipomo, CA 93444

Please return this form with your payment. For information regarding credit card payments, please call 805-619-5354 or email NAACPSLOCTY@gmail.com

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