

# Self Empowerment through Education

## Contributor Information



Name: \_\_\_\_\_  I wish to remain anonymous

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Contribution amount: \$ \_\_\_\_\_

Can we contact you by phone or email?  Yes  No

Comments: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

### **Self Empowerment through Education (SEED)**

**P.O. BOX 204,  
LENNI, PA 19052**

*Contributor names with the 'anonymous' box checked will not be listed for public view.*