



Donation Form

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: () _____

Amount: \$500 ___ \$250 ___ \$100 ___ \$50 ___ \$ Other ___

Please send this form and your generous contribution to:

Citizen's for Soper
6530 Saltgrass Road
Lincoln, NE 68521