P.O. Box 472
Moorestown,
New Jersey 08057
(609) 231-1885

_____ I would like to become a member of the Alice Paul Centennial Foundation, Inc. Please send me a brochure (memberships are tax-deductible as allowed by law).

_____ I would like to make a donation to save Paulsdale. Please send a brochure (donations are tax-deductible as allowed by law).

_____ I would like to volunteer some time. Please send me a volunteer form so I can let you know what I can contribute to the effort.

_____ Please send information about the Foundation and the Preserving Paulsdale campaign to the people listed below.

My Name _____
Address _____
City/State _____ Zip _____
Phone (Day) _____ (Evening) _____

SEND APCF AND PAULSDALE INFORMATION TO:
Name(s) _____
Address _____
City/State _____ Zip _____
Phone (Day) _____ (Evening) _____

ORDER FORM

Name _____ Street _____
City/State _____ Zip _____
Phone (Day) _____ (Evening) _____

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Send check payable to APCF to:
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Moorestown, NJ 08057

* **PLEASE** specify 1st, 2nd and 3rd size and color choices when ordering.

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