

Message From Marli



Help Spread the Message...

Name of Walker: _____

Phone Number: _____ Email: _____

I am participating in this year's Miles for Marli in my area. All proceeds will help raise awareness of ovarian cancer and help promote early detection and prevention. If you wish to sponsor me, please make a pledge. Make checks payable to Message From Marli Foundation, Inc. THANK YOU

	NAME	ADDRESS	PHONE NUMBER	E-MAIL	\$ PLEDGE AMOUNT	RECEIPT REQUESTED
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