

I wish to underwrite the following Artist (s):

Concertmaster Chair and Soloist:

\$5,000 (2 available)

Principal Chair:

\$3,000 (6 available)

Members:

\$1,800 (12 available)

iPalpiti Soloists:

\$2,500 (6 available)

DONOR'S NAME

TELEPHONE

STREET ADDRESS

CITY

STATE

ZIP

Type and Credit Card Number

Expiration Date

Credit Card Holder's Name

Signature

Please check one:

_____ I am underwriting the artist(s) noted above in my name.

_____ I am underwriting the artist(s) noted above in honor/memory of:

HONOREE'S NAME

Mail to:

iPalpiti Artists International, Inc.
2430 Apollo Drive
Los Angeles, CA 90046-1628

Fax to:

iPalpiti Artists International, Inc.
323-969-8742