

PLEASE PRINT

Contributor Name _____

Mailing Address _____



of Navarro County

(903) 874-5253

Make check payable to:

United Way of Navarro County • 115 N. Main Street • P.O. Box 567 • Corsicana, TX 75151-0567

Total Gift

\$

Paid Now

\$

Balance Due

\$

Payroll Deduction:

Yes, I want to help - Please have my employer deduct

\$ _____ per pay period . . . or

\$ _____ per _____

THANK YOU for giving
through
**UNITED WAY OF
NAVARRO COUNTY**

Signature _____ Date _____