

FIRM OR INDIVIDUAL

Division _____

Campaign _____

Your United Way Gift
Is
TAX DEDUCTIBLE

PLEASE GIVE YOUR FAIR SHARE
(See Reverse)

I agree to Give to the UNITED WAY

Total Gift	Paid now	Balance

I/We agree to pay as follows: Quarterly Monthly

OR _____

Bill, Please No Reminder Need

Signature _____

UNITED WAY

P.O.Box 81

221-2761