

"Where there is a wheel, there is a way"

NAME _____
ADDRESS _____
COMPANY NAME _____

DESIGNATED COUNTIES

__ SCREVEN __ BULLOCH
OTHER _____

Make checks payable to: *United Way of Screven County*

P.O. Box 27 - Sylvania, GA 30467

You can pledge to certain agencies Just put agency name here _____.

The United Way begins with and my pledge. Use my gift below to help Health & Human Care Service add to the quality of life in Screven County.



PAYROLL DEDUCTION (pledge Card Retained By Firm)
I authorize my employer to deduct \$ _____ per paycheck
for _____ pay period for total pledge of \$ _____

**O
R**

DEDUCTION CONTRIBUTION (pledge Card Returned)
I pledge a one time gift of \$ _____
a check or cash is attached.

**GIVE
THE SAME
AMOUNT AS
LAST YEAR**

Authorized Signature _____ Date _____