

CONTRIBUTION FORM: SALLY AUSTIN CITIZEN EDUCATION PROJECT

To pay by check, please print out and complete the form below and mail to:

The League of Women Voters of the Piedmont Triad

PO Box 9721

Greensboro, NC 27429

Name _____

Address _____

City _____ State _____ Zip Code _____

Amount Enclosed \$ _____ Phone (opt) _____

Email Address _____

____ I wish my contribution to remain anonymous.

____ I wish my contribution to be tax deductible where allowed by law. My check is made out to the "*LWVPT Education Fund, Inc.*" which is a 501(c)(3) organization.

Please write Sally Austin Citizen Education Project on the check.

Comments _____
