

**PAWCATUCK NEIGHBORHOOD CENTER
2015 ANNUAL APPEAL**

Name: _____

Street: _____

Town: _____ State: _____ Zip _____

Pawcatuck Neighborhood Center, PO Box 1697, Pawcatuck, CT 06379

____ up to \$99 = diapers and formula for 1 infant for one week -- **Friend**

____ \$100-\$299 = fresh, cold milk for 100 children for up to one week ~ **Supporter**

____ \$300-\$999 = emergency fuel oil for up to 2 families for one month ~ **Patron**

____ \$1000+ = provides transportation for Seniors no longer able to drive ~ **Benefactor**

"Equal to" does not designate your Annual Appeal to one program area.



My name may _____ may not _____ be included in the PNC Annual Report.

Make checks payable to the Pawcatuck Neighborhood Center
or pay online through PayPal at www.the-PNC.org

Memo: 2015 Annual Appeal **THANK YOU FOR YOUR SUPPORT!**