



# UTAH COUNTY CHARITABLE DONATION FORM

I, \_\_\_\_\_, would like to donate to the following Utah  
Please Print Your Name

County approved charities:

- Food and Care Coalition \$ \_\_\_\_\_ per pay period
- Friends of the Children’s Justice Center \$ \_\_\_\_\_ per pay period
- Habitat for Humanity \$ \_\_\_\_\_ per pay period
- Project Read \$ \_\_\_\_\_ per pay period
- United Way \$ \_\_\_\_\_ per pay period

**OR**

I prefer a one-time donation of \$ \_\_\_\_\_ to \_\_\_\_\_.  
Dollar Amount Charity Name

I understand that my contribution will begin with the next available pay period, and continue, until I direct otherwise.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Last four of SSN, or Employee # \_\_\_\_\_ Contact Phone # \_\_\_\_\_



CHILDREN’S JUSTICE center



FOOD & CARE  
COALITION