

## Donations, Memorials, and Tributes

Enclosed is my tax-deductible donation of \$\_\_\_\_\_made payable to Pathways, Inc.

Name		
Address		
City	State	Zip
	If applicable, my donati	ion is:
In Memory of		
OR		
In Honor of		
Name	knowledgment of donation sh	
	State	
Care Coordina Childcare and Community ar Residential Se Specific Progr	Educational Services ad Habilitation Services ervices	
R	eturn completed form with you	ur donation to:

Pathways, Inc. c/o Stephanie Miller 33 Denison Parkway West Corning, NY 14830 T: (607) 937-3200