



UNITED WAY PLEDGE FORM
MAKE A PLEDGE. MAKE A DIFFERENCE.



INFORMATION

Name _____

Address _____ Phone _____

City _____ State _____ Zip _____

Email Address _____

Work Address _____ City _____ State _____

MAKE YOUR PAYROLL DEDUCTION GIFT

A minimum of \$5 per pay period is required for payroll deduction.

I want to contribute the following amount each of the 26 pay periods:

\$100 \$40 \$25 \$10 \$5 Other \$ _____

Total annual gift of \$ _____

Please visit our intranet prior to making your gift for details on PTO benefits available to all donors.

CHOOSE YOUR ALLOCATION

UNITED WAY ALLOCATION

Community Impact Fund - The best way to help the most people. Help support all the work of United Way.

\$

Agency of Choice: Of my total gift please allocate this amount to the agency listed below

\$

Agency Name: _____

WOULD YOU LIKE TO JOIN A LEADERSHIP NETWORK

LEADERSHIP GIVER (annual gift of \$1000 or more)
A diverse group of philanthropic professionals seeking to transform communities.

When recognizing my gift please list my/our name(s) as follows:

WOMEN'S LEADERSHIP COUNCIL (annual gift of \$1,000 or more)
A network of women dedicated to making a positive impact in your community.

I wish to remain anonymous:

TOCQUEVILLE SOCIETY (annual gift of \$10,000 or more)
A national network of philanthropic leaders engaged to create long-lasting, positive change through outstanding community service and financial support.

THANK YOU!
For your generosity and for helping our neighbors in need.

PLEASE SIGN & DATE

Signature

Date

Note: All payroll deductions are continuous from year-to-year unless otherwise directed by you. Gifts designated to a specific agency must be selected on an annual basis. All undesignated gifts will be directed to the Community Impact Fund. Your gift is tax deductible as allowed by law. No goods or services were received in exchange for this contribution.