## **UNITED WAY PLEDGE FORM**

## 1 CONTACT INFORMATION (PLEASE PRINT)

First Name	MI
Last Name	
Address	_
City	State Zip Code
Phone	M/F
Company Name	_
Email Address	
Payroll Deduction I want to contribute the fo	llowing amount each pay check:
I want to contribute the fo	, ,
I am paid:	Other \$  y (26) O Bi-monthly (24) O Monthly (12
O Weekly (52) O BI-Weekly	
Direct Gift	OR
My total direct gift to Unite	ed Way this year: \$
To be paid by: O Personal Check (enclosed) check #	O Please bill me at address above (\$100 min. annually
O Cash (enclosed)	
B. SIGN	
Signature:	
Date:	

Thank you for helping where the needs are the greatest in our community. No goods or services were received in exchange for this contribution. Please make a copy of this pledge for your records.

Completion of sections 4 & 5 is optional

## 4. LEADERSHIP GIVING

My gift qualifies me for membership in the following Leadership Giving Societies (check all that apply) Young Leaders Society - \$365 plus (age 40 & under) Women's Leadership Council - \$1,000 plus **Leadership Circle** - \$1,000 - \$9,999 Alexis de Tocqueville - \$10,000 plus Peacock Legacy Society - Please contact me about how to include United Way in my estate plans Please include my spouse: Email: 5. MY INVESTMENT Where the needs are greatest - trained community volunteers will allocate the funds Education - giving kids a solid start Basic Needs - stabilizing families in crisis Health - support prevention services so youth and adults are healthy

Restricted gift (\$50 minimum gift). Designated gifts can only be made to United Way of NWGA Community Partners or other United Ways. Agency name and address:

Thank you for your investment. Learn more about United Way @UnitedWayNWGA on











Please return this pledge card to your HR Department or send to: United Way of Northwest Georgia P.O. Box 566, Dalton, GA 30722

Phone: 706.CAN.HELP Fax: 706.226.1029 info@ourunitedway.org ourunitedway.org

