



At United Way, we are on a **MISSION** to crush poverty.

PLEDGE FORM

MY INFORMATION

Please print.

Mr/Mrs/Ms/Dr First Name Middle Initial Last Name

Spouse's Name Spouse's Employer I plan to retire within the next year.

Informal Name(s) e.g. Joe & Patty

Home Address - Street City State Zip

Email Address Personal Phone Work Phone

Employer Birth date

MY INVESTMENT

Please choose one of the following ways to give.

A EASY PAYROLL DEDUCTION

I want to contribute the following amount each pay period:

\$3 \$7 \$10 \$20

Other \$ _____

I have _____ pay periods each year.
(12, 24, 26, 52, etc)

A total annual gift of \$ _____

B DIRECT GIFT

A direct gift of \$ _____

Direct gift to be paid by:

- Cash (enclosed)
- Personal check (enclosed)
made payable to United Way of Erie County
Check # _____ Date _____
- Credit Card, Stock or Real Estate
UnitedWayErie.org/Give or (814) 456-2937

C BILL ME

Please bill me for a pledge of \$ _____

- One time only
- Quarterly
- Monthly

START DATE: _____ / _____ / _____
mm yyyy

IMAGINATION LIBRARY

Give the gift of reading.

In addition to my annual gift, I would like to provide a child with one book a month for a year at the cost of \$30/yr.

of children I wish to sponsor _____
x \$30 = \$ _____*

*Please add this amount to my:

- Payroll Deduction total
- Direct Gift total
- Bill Me total

Annual contribution (from A, B or C) \$ _____ + Imagination Library contribution \$ _____ **TOTAL INVESTMENT = \$ _____**

MY IMPACT

DIRECT 100% OF MY INVESTMENT TO UNITED WAY OF ERIE COUNTY'S GENERAL COMMUNITY SUPPORT

The most powerful way to help crush poverty in Erie County.

OR direct my investment to one or both of the following:

STUDENT SUCCESS: \$ _____ *My gift will ensure more local children have the tools and resources they need to succeed from birth through high school graduation, including United Way's community schools initiative.*

FAMILY STABILITY: \$ _____ *My gift will help ensure more local families are able to meet their basic needs without any form of public or private assistance.*

RECOGNITION OPTIONS

Please check all that apply.

- ANONYMOUS:** I/we wish to remain anonymous. (Names will not be published.)
- LOYAL CONTRIBUTOR:** I/we have been giving to United Way (in any community) for 10 or more years.
- YOUNG LEADERS SOCIETY:** I/we are under age 45 and contribute at least \$500 or under age 30 and contribute at least \$250.
- LEADERSHIP GIVER:** I/we contribute a gift of \$1,000 or more annually.

Please check the accuracy of all your entries.

Signature: _____

Date: _____