

# United Way Pledge Form



United Way  
of Northwest Michigan

MR/MRS/MS/DR FIRST NAME MI LAST NAME

HOME ADDRESS CITY STATE ZIP

EMAIL ADDRESS DAYTIME TELEPHONE

\* Home address must be provided for gift acknowledgement. Please check the accuracy of all your entries.

## United Way Community Fund

AMOUNT \$

### Giving Options

EASY PAYROLL DEDUCTION  
I want to contribute the following amount each pay period:

My gift of \$1 a day.

Other \_\_\_\_\_

Yes. I am interest in VOLUNTEERING, please contact me by \_\_\_\_\_.  
(phone or email)

OTHER PAYMENT METHOD  
Direct gift to be paid by:

- Cash
- Personal check (enclosed)
- Bill my credit card (circle one)  
American Express, Mastercard, Visa

#: \_\_\_\_\_ Exp. Date \_\_\_\_\_

MY GIFT OF \$500

Qualifies me for the membership in the Circle of Friends:

- My name will be listed as it appears above.
- I prefer that my gift remain anonymous.
- List my name as follows:

Signature \_\_\_\_\_

Under the law 100 % of the donation recieved is tax deductible. Donors giving through payroll deduction, keep this pledge card and your payroll stub for your tax records.

Top copy: United Way

Bottom copy: Donor