

# PLEDGE FORM

LIVE UNITED



United Way  
of the Blue Mountains

## 1 MY INFORMATION

FIRST NAME	MIDDLE NAME	LAST NAME	
MAILING ADDRESS- STREET		CITY	STATE ZIP
EMAIL ADDRESS	PERSONAL PHONE	WORK PHONE	
EMPLOYER	YEARS AS A UW DONOR	D.O.B	<input type="radio"/> I AM RETIRING THIS YEAR PLEASE KEEP IN TOUCH
PLEASE THANK ME VIA: <input type="radio"/> EMAIL <input type="radio"/> MAIL <input type="radio"/> PHONE			

## 2 MY INVESTMENT

### ☐ EASY PAYROLL DEDUCTION

I want to contribute this amount each pay period:

\$ \_\_\_\_\_ X \_\_\_\_\_ = \$ \_\_\_\_\_  
(gift per pay period) (pay periods per year) (total annual gift)

### GIFT ENCLOSED

Please make checks payable to United Way of the Blue Mountains

TOTAL GIFT: \$ \_\_\_\_\_

☐ CASH ☐ CHECK ☐ CARD

CARD No: \_\_\_\_\_

EXP DATE: \_\_\_\_\_ CVC Code \_\_\_\_\_

☐ PLEASE KEEP MY GIFT ANONYMOUS

☐ PLEASE LINK MY GIFT TO MY SPOUSE/ PARTNER

SIGNATURE TO AUTHORIZE PLEDGE: \_\_\_\_\_ Date: \_\_\_\_\_

## 3 MY IMPACT

- ☐ I WANT TO GIVE TO THE **COMMUNITY FUND**,  
AND MAXIMIZE MY GIFT BY SUPPORTING ALL OF UNITED WAY'S WORK IN HEALTH, EDUCATION & FINANCIAL STABILITY
- ☐ I AM INTERESTED IN VOLUNTEERING ☐ Dolly Parton's Imagination Library
- ☐ GIFT DESIGNATED TO SPECIFIC CHARITY

Charity Name:

Charity Address:

☐ SHARE MY INFORMATION WITH MY DESIGNATED AGENCY