



UNITED WAY PLEDGE FORM

PO Box 223 Sturgeon Bay, WI 54235 Phone: 920-746-9645 Email: info@unitedwaydc.com

STEP 1 YOUR INFORMATION Please print.

Dr. Ms. Mrs. Mr.

FIRST NAME MI LAST NAME SUFFIX

PREFERRED ADDRESS Check if this is a new address BIRTHDATE

CITY STATE ZIP

PREFERRED PHONE Land (Home) Land (Business) Cell

PREFERRED EMAIL ADDRESS Personal Business

EMPLOYER I plan to retire this year on: ____/____/____

Thank you!

We'd like to recognize you in our publications. Please tell us how you/your spouse or partner would like your name to appear.

I wish to remain anonymous in publications.

Are you a Loyal Contributor?
We want to honor you! What year did you start giving to United Way?

STEP 2 YOUR DONATION

Payment Options

Credit Card -
Account Number _____
Exp. Date _____ CVV Code _____

Personal Check - Payable to United Way (check # _____)

Bill Me - Beginning in January, please bill me at the above address:
 Monthly Quarterly Semi-Annually Annually

I am giving at Leadership Level Please combine my leadership give with my spouse/partner _____

Tocqueville Society (\$10,000+) **Diamond** (\$7,500 - \$9,999) **Emerald** (\$5,000 - \$7,499) **Sapphire** (\$2,000 - \$4,999) **Ruby** (\$1,000 - \$1,999) **Pearl** (\$500 - \$999)

Payroll Deduction (Per Pay Period)

AMOUNT PER PAYCHECK	# OF PAY PERIODS
<input type="checkbox"/> \$100 <input type="checkbox"/> \$50 <input type="checkbox"/> \$25	X _____ =
<input type="checkbox"/> \$10 <input type="checkbox"/> \$5 <input type="checkbox"/> \$2	
<input type="checkbox"/> \$1 <input type="checkbox"/> Other \$_____	

TOTAL ANNUAL GIFT

\$ _____

STEP 3 YOUR SIGNATURE

Signature _____ I would like to donate stocks/securities, please contact me.
We respect your privacy and do not share your personal information with third parties.