## PLEDGE FORM



Name:		Employer:
Home Address:		City/Zip:
Email:		Phone:
Check here if you'd like your	gift to be anonymous	
P 2 Gift Amount and F	Payment Informatio	n:
Payroll Deduction:	Gift Enclosed:	Bill Me:
\$ per pay period	Total Gift Amount: \$	
Total Annual Gift: \$	- Cash	Total Annual Gift: \$
Weekly (52)		Monthly
Bi-weekly (26)	Check	Quarterly
Monthly (12)	Auto Debit/Bank Dra (check here to request forr	n)
	Credit Card (click "Donate Now" buttor	Once
One Time	(click "Donate Now" buttor www.harveyunitedway.org	
P 3 Choose how you w	want to invest in the	community (optional
General community fu	nd: use my gift where it is nee	ded most
United Way's Focus Ar	eas (\$ or %): Education:	Health: Income:
Dolly Parton Imagination	on Library - sponsor a child fo	r \$26/per year (\$ or %):
Please send my gift to	a United Way in another com	munity:
I am interested in volu	nteer opportunities with United	d Way or in the community.
_		
$\mathbf{P}_{4}$ Sign and Date you	ır pledge:	

Harvey County United Way is a 501c3 organization. Gifts are tax deductible to the extent allowed by law. Pressure to give is unacceptable. No goods or services were given to you in exchange for your donation. Please keep a copy of this form for your personal tax records. For more information, visit www.harveyunitedway.org.