UNITED WAY
Southeast Missouri

PLEDGE FORM

1. MY INFORMATION Please Print

FIRST NAME M.I. LAST NAME BIRTHDATE

HOME ADDRESS (REQUIRED)

CITY STATE ZIP

PHONE EMAIL YOU CHECK SO WE CAN THANK YOU AND SHARE EVENTS & NEWS

SIGNATURE (MY SIGNATURE AUTHORIZES MY PLEDGE)
We respect your privacy and do not share your personal information with third parties.

☐ **COMBINE OUR GIFTS.** Please combine my gift with that of

NAME

THEIR EMPLOYER

LIST OUR NAMES AS

UNITED IS THE WAY™

2. MY CONTRIBUTION

ONLINE PAYROLL DEDUCTION

Pledge online at www.unitedwayofsemo.org/donate
Completed ___/___/20___

EASY PAYROLL DEDUCTION*

1. I want to donate this amount **each** pay period:
☐10 ☐15 ☐25 ☐50 ☐100 ☐Other:_____

2. Pay periods in year
☐Weekly (**52** deductions)
☐Bi-Weekly (**26** deductions)
☐Bi-Monthly (**24** deductions)
☐Monthly (**12** deductions)

3. Total payroll deduction $

DIRECT GIFT Total amount $

☐ **CASH/CHECK**
Enclosed. Checks payable to United Way.
Check # _____

☐ **BANK DRAFT**
☐ Continue an existing draft.
☐ First time draft or account change of existing draft. (Attach voided check).

☐ **CREDIT CARD**
To ensure privacy, please donate at www.unitedwayofsemo.org/donate or call 573-334-9634

☐ **STOCKS/SECURITIES**
Email Mark.Stone@unitedwayofsemo.org

I'M GIVING AT A LEADERSHIP LEVEL

☐ **LEADERSHIP DONOR**
Total gift of $500 or more

☐ **UNITED WAY PILLAR**
My individual or combined gift of $1,000 or more

☐ CONTACT ME ABOUT MAKING A PLANNED GIFT FOR GREATER IMPACT

DATE: _____ **Please keep a copy of this form for your tax records.** You will also need a copy of your pay stub, W-2, or other employer document showing amount withheld and paid to a charitable organization. United Way of Southeast Missouri is a 501(c)(3) non-profit organization; your donation is tax-deductible as allowed by current tax law. No goods or services were provided in exchange for this contribution. Consult your tax advisor for more information.