

UNITED WAY OF RACINE COUNTY EMPLOYEE PLEDGE FORM



United Way
of Racine County

MY INFORMATION

Mr./Mrs./Ms./Dr. First Name _____ Last Name _____
Home Address _____ Apt. # _____ City _____ State _____ Zip _____
Birthdate (mo/yr) _____ Email _____ Personal Work
Phone _____ Home Work Cell Employer _____ I am retiring this year

RECOGNITION

- I prefer to remain anonymous.
- I am a loyal donor who has contributed for _____ years.
- I have included United Way in my will/estate plans.
- I would like additional information about planned giving options such as memorials, beneficiaries, gifts, trusts or bequests.
- I want to provide a gift of stock, real estate, electronic funds transfer or life insurance. Please call us at 262-898-2246.
- I want to learn more about Women United.
- Please combine my gift with my spouse/partner.
Name _____
Employer _____
- Please list my/our name(s) as below in all recognition materials.

(please print clearly)

MY CONTRIBUTION

For less than \$20 per week, you can be a leadership donor!

MY ANNUAL GIFT \$ _____

Easy Payroll Deduction

I authorize my employer to deduct \$ _____ per pay period(s):

- Weekly Biweekly Semimonthly Other: _____

Personal Billing

Please send my personal billing statement :
(\$50 minimum and home address required)

- Monthly Quarterly One time Start date: _____

Credit Card (\$50 minimum)

- MasterCard Visa American Express Discover

Account # _____

Exp. Date _____

Please charge: Monthly Quarterly One time

Cash or Check

Attached and payable to United Way of Racine County

Signature (Required) _____ Date _____

MY INVESTMENT (OPTIONAL)

Your gift will be directed to the Community Fund, unless otherwise specified.

United Way Community Fund

The most powerful way to invest your contribution. Your gift supports all United Way-funded activities. Or specify your gift to:

- Health (3030) _____ Education (3010) _____ Financial Stability (3020) _____ Essential Services (1005) _____
 Imagination Library (1010) _____ LIFT (4000) _____ Schools of Hope (3090) _____ VITA (4010) _____ Women United (4080) _____

Designations

Please complete the separate donor designation form available from your workplace or the United Way of Racine County office. Donations must be at least \$50 to be designated; donations that do not meet this amount will be directed to the Community Fund.

- I have completed a donor designation form.

THANK YOU FOR YOUR SUPPORT

White Copy - Return to United Way | Yellow Copy - Return to Employer | Pink Copy - Keep for tax purposes
No goods or services were given in return for this contribution. The entire contribution is tax deductible as allowed by law.

United Way of Racine County • 2000 Domanik Drive • Racine, Wisconsin 53404
262-898-2240 • UnitedWayRacine.org • facebook.com/UWRacine