

PLEDGE FORM



MR/MRS/MS/DR _____

FIRST NAME

LAST NAME

COMPANY

HOME ADDRESS (for credit card charges, address listed must be your billing address.)

CITY

STATE

ZIP

HOME PHONE

DAYTIME PHONE

EMAIL

Please send me donor updates via email.

PLEASE COMBINE MY GIFT WITH MY SPOUSE: _____

SPOUSE'S NAME AND EMPLOYER

MY GIFT TO MY COMMUNITY (Choose one of the following ways to give)

CONTRIBUTION AMOUNT/PREFERENCE

EASY PAYROLL DEDUCTION

I want to contribute the following amount each pay period:

\$50

\$25

\$10

\$5

Other \$ _____

I am paid:

Monthly

2 Times per month

Weekly

Every 2 weeks

OR

ONE-TIME payroll deduction

My annual gift \$ _____

OR

DIRECT GIFT

Bill Me ___ Annually (March) ___ Quarterly

Cash

Personal Check

Online via Paypal

Securities (please call 563.263.5963)

Credit Card: Discover, VISA or Mastercard

Card number _____

Exp Date _____

CVV # _____

My annual gift \$ _____

MY GIFT OF \$1,000 OR MORE

qualifies me for membership in the Pearl Leadership Society.

Please list my/our name(s) as follows: _____

I prefer that my gift remain anonymous.

Please include me in Educate United.

Please add me to the United Way Monthly Newsletter email list.

IMAGINATION LIBRARY (Give the gift of reading)

In addition to my annual contribution, I would like to provide a child with one book a month for a year at the cost of \$25/year.

Number of children you wish to sponsor _____ x \$25 _____ *

* Please add this amount to my:

Payroll Deduction Total Direct Gift Total

Bill Me Total

MY GIFT TO MY COMMUNITY: \$ _____

IMAGINATION LIBRARY: + \$ _____

MY TOTAL PLEDGE: \$ _____

Signature _____

Date _____

Please check the accuracy of all your entries. Thanks for investing in United Way of Muscatine. Please keep a copy of this form for your tax records. Pay stubs serve as tax documentation for payroll deductions. Consult your tax advisor for more information.