

PLEDGE FORM

Please fill out the following completely.
All personal information is never shared with third parties.



United Way
of Wyoming Valley

STEP 1: YOUR INFORMATION

Name _____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Employer Name: _____

Email Address: _____

Please send information about Estate Planning and how to include United Way in my will. I have already included United Way in my will.

STEP 2: YOUR GIFT

EASY PAYROLL DEDUCTION

I want to contribute the following amount per pay period.

\$ _____ x _____ = _____
Amount per pay # of pay periods Total Pledge

BILL ME AT HOME Amount \$ _____ ((\$50 Minimum)

One-Time Monthly Quarterly

Billing Start Date: _____

PAY IT NOW Amount \$ _____ to be paid via:

Cash (enclosed) Personal check (enclosed)

Check #: _____ Check Date: _____

Visa Mastercard Discover AMEX

Card #: _____ Exp. Date: _____

Billing Zip Code: _____ Security Code: _____

One-Time Monthly Quarterly

Billing Start Date: _____

STEP 3: INVESTMENT OPTIONS

Would you like to choose how to invest your gift in your community? If you would, please assign the amounts below.

\$ _____ **IMPACT FUND** – INFLUENCE THE CONDITION OF ALL – LIVE UNITED. The most powerful way to invest your contribution. Your gift will be combined with thousands of others in Wyoming Valley to address poverty among children by helping local at-risk families become self-sufficient while ensuring a safety net for the most vulnerable in our community.

\$ _____ **EDUCATION** – Helping at-risk children enter kindergarten ready to learn and move through school and beyond graduation with confidence.

\$ _____ **FINANCIAL STABILITY** – Helping at-risk individuals and families achieve greater financial stability.

\$ _____ **HEALTH** – Helping at-risk children and families achieve good health.

\$ _____ **TOTAL** (excluding endowment gifts)

\$ _____ **ENDOWMENT** – Helping to guarantee our ability to respond to the changing landscape of the Wyoming Valley for generations to come.

I would like to direct all or part of my gift to a neighboring United Way, the United Way of _____ in the amount of \$ _____
((\$50 Minimum)

STEP 4: YOUR SIGNATURE

Please sign here to authorize your pledge.

Signature: _____ Date: _____

Please contact United Way for securities and auto draft options.

PLEASE SEE REVERSE SIDE

LEADERSHIP GIVING

Yes, I am a Leadership Contributor. In recognition of my gift, please list my/our name(s) exactly as follows:

(If you would prefer to remain anonymous, please indicate above)

My gift should be combined with my spouse's.

Spouse's Name: _____

Employer: _____

Yes, I'm a member of a Labor Union. Please indicate Union Membership below:

Union Name: _____

Local #: _____

Yes, I'm a member of the Young Professionals Society. I am under 40 years of age and able to give a gift of \$300 or more per year.

United Way's Loyal Contributor Program recognizes individuals who have given to the United Way for 10 years or more. I have been contributing to United Way for _____ years.

ALEXIS DE TOCQUEVILLE SOCIETY

An annual gift of \$10,000 or more

DOROTHY DARLING SOCIETY

An annual gift of \$5,000 – \$9,999

VALLEY CHAMPION

Ruby Crest \$2,500 – \$4,999

Emerald Crest \$1,000 – \$2,499

Sapphire Crest \$500 – \$999

LABOR LEADERSHIP GIVING LEVELS

Platinum \$1,000 or more

Gold \$750 – \$999

Silver \$500 – \$749

Bronze \$300 – \$499

WHAT DOES UNITED WAY DO?

United Way of Wyoming Valley supports Wyoming Valley children, families, and community members through our key impact areas:



EDUCATION

Helps ensure early grade success for children



HEALTH

Helps at-risk children and families achieve good health



FINANCIAL STABILITY

Helps individuals and families become financially stable



SAFETY NET

Addresses threats to immediate well-being

Community change takes partners, donors, volunteers, corporations, community leaders, advocates, and most of all you.

THANK YOU FOR CHANGING LIVES



United Way
of Wyoming Valley

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