

PLEDGE FORM

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



United Way
of Wyoming Valley

Name: _____ Birth Date: _____
Home Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____
Employer Name: _____
Email Address: _____

Please send information about Estate Planning and remembering United Way in my will. I have already included UWWV in my will.

GIVING OPTIONS

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 (\$50 minimum) Amount \$ _____
Total Pledge

One Time Monthly Quarterly

Billing Start Date: _____

PAY IT NOW: \$ _____ Gifts 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

SECURITIES: (Contact United Way for details)

AUTO DRAFT from bank account (Contact United Way for details)

PLEASE CHOOSE HOW TO INVEST YOUR GIFT IN YOUR COMMUNITY

\$ _____ **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 reduce poverty among children by helping local at-risk families become self-sufficient, while insuring a safety net for individuals/families that face threats to their immediate well-being.

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

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

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

\$ _____ **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)

PLEASE SIGN HERE TO AUTHORIZE YOUR PLEDGE

Signature: _____ Date: _____

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 # _____

I am interested in supporting the United Way's Dolly Parton Imagination Library, please contact me with more information.

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 to \$9,999

VALLEY CHAMPION

Ruby Crest \$2,500-\$4,999

Emerald Crest \$1,000-\$2,499

VALLEY LEADER

Gold \$750-\$999

Silver \$500-\$749

LABOR LEADERSHIP GIVING LEVELS

Platinum \$1,000 or more

Gold \$750-\$999

Silver \$500-\$749

Bronze \$300-\$499



A copy of the official registration and financial information of the United Way of Wyoming Valley may be obtained from the PA Department of State by calling toll-free, within Pennsylvania, 1-800-732-0999. Registration does not imply endorsement. This organization does not provide goods or services as a whole or partial consideration for any contributions.

www.unitedwaywb.org • 100 N. Pennsylvania Ave., 2nd Floor, Wilkes-Barre, PA 18701 • Phone: 570.829.6711

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