



HOW TO FILL OUT A PLEDGE FORM

We are here to help if you have any questions. 712-255-3551

Employee Name/ID Number & Past Gift Amount



 Phone: 712-255-3551 FAX: 712-255-3028

STEP 1 Name and Address PLEASE PRINT United Way will not share your information.

Name _____ Employer _____

Home Address _____ City _____ State _____ Zip _____

Email _____ Phone _____
_____ Cell _____ Work _____ Work

How many years have you been giving to United Way? _____ Date of Birth ____/____/____

STEP 2 Gift & Leadership Giving

Payroll Deduction

\$25 \$20 \$15 \$10 \$5 \$3 \$ _____ Other Amount Per Pay Period
Number of Pay Periods: 12 24 26 52 One-Time

Cash / Check Enclosed \$ _____ Check # _____

\$ _____ Total Annual Pledge

Bill Me at Home (\$50 min.) for \$ _____ once quarterly monthly
(Beginning January or specify date) ____/____/____ (Include home address above)

Gifts of Stock or Property (Call United Way at 712-255-3551)

Credit or Debit Card go to: unitedwaysiouxland.com/donate

Leadership Recognition (optional)

<p>United Way recognizes leaders at the following levels. If your spouse gives separately, you may combine your gifts</p> <p><input type="checkbox"/> Young Leaders Society (Under 40).....\$250+</p> <p><input type="checkbox"/> Caring Society.....\$500-\$999</p> <p><input type="checkbox"/> Garretson Society.....\$1,000-\$2,499</p> <p><input type="checkbox"/> Garretson Society Silver.....\$2,500-\$4,999</p> <p><input type="checkbox"/> Garretson Society Gold.....\$5,000-\$9,999</p> <p><input type="checkbox"/> Tocqueville Society.....\$10,000+</p>	<p>For a combined gift please provide the following.</p> <p>Spouse's Name _____</p> <p>Workplace _____</p> <p>Amount of gift _____</p> <p>Name listing for recognition _____</p> <p>OR <input type="checkbox"/> I prefer to be Anonymous.</p>
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STEP 3 SIGNATURE _____ Date _____

OPTIONAL: Impact Areas (Minimum Designation Amount \$50)
Invest my gift in the area I care most about: (Designations made after January 31 will be added to the Community Impact Fund.)
 By entering a dollar amount below I elect to have my gift go to a specific focus area.

HEALTH EDUCATION FINANCIAL STABILITY \$50 Minimum

To designate to an agency partner or initiative, enter the agency name/initiative, code, and amount below.
 Each designation must be at least \$50. Only designations to United Way of Siouxland partner agencies & initiatives will be honored.

Agency/Initiative: _____ Code - on back: _____ Amount: \$ _____
 Agency/Initiative: _____ Code - on back: _____ Amount: \$ _____

Check if you DO NOT want your name released to agencies.

1. Contact information is important for United Way so we can make sure and recognize people's giving.

2. The Pledge Amount clearly stated ensures that payroll deductions are correct. Let everyone know how many pay periods they have as some may be different than others. The total pledge equals their total gift. I.E. If I choose to give \$5 per paycheck and I get paid 26 times per year my total pledge amount is \$130

3. Leadership Recognition lets United Way recognize individuals for their generosity.

4. Signature acknowledges that the employee agrees to pay their pledge. Your payroll department will require a signature.

OPTIONAL: Impact Areas
 This section is NOT REQUIRED and used only if someone chooses to designate their gift.



Did you remember to give copies of pledge forms to your payroll department?