

United Way Pledge Form



United Way
of Sumner County

Making a difference in our community is as easy as 1-2-3!

1 MY INFORMATION

Please Print

Mr./Mrs./Ms./Dr. First Name Middle Initial Last Name Suffix

Home Street Address Apt. #

City State ZIP Home/Cell Phone

Preferred Email (for newsletter updates) Work Phone

Employer

United Way only uses personal information to acknowledge your gift, provide necessary tax receipts, and communicate how your gift is helping. Information is not sold or shared.

2 MY GIFT

A. My Total Gift Amount: \$ _____

B. To Be Paid By Either:

Payroll Deduction of \$ _____ per pay day X _____ number of pay periods = \$ _____
(I authorize my employer to deduct my contribution per pay period as noted above)

A Check made payable to United Way of Sumner County: Check # _____

Cash (paperclip to pledge form)

C. **OPTIONAL: COMPLETE ONLY IF YOU WISH TO PROVIDE SPECIFIC DONATION INSTRUCTIONS**

I would like my gift to support the following United Way of Sumner County Focus Area:

Education Income/Financial Stability Health Rebuilding Lives

I would like my gift to support:

Another United Way in _____ County

A United Way of Sumner County Partner Agency: _____

Another 501(c)3 non-profit organization: _____

3 SIGN & DATE

Thank You! Please sign & date below and return your pledge form to your workplace Campaign Coordinator.

Signature Required

Date

United Way of Sumner County publicly recognizes Leadership Donors (gifts of \$500 or more) after each campaign.

Name to be used for recognition if different than above: _____

I would like my gift to be combined with my spouse/partner's gift listed below for the purpose of recognition

Name: _____ Employer: _____ Amount: \$ _____

Check here if you would like to remain anonymous and not be recognized for your Leadership Gift