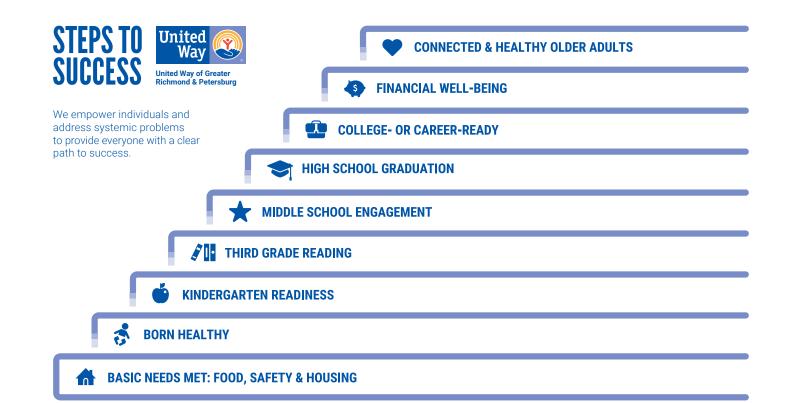




We've seen how suddenly hard times can appear. It's up to each of us to give back in an effort to strengthen our community and make sure our local United Way is there to lead through periods of urgent need and beyond.





2021-2022 CAMPAIGN PLEDGE FORM

Ste	p 1		Y

our Information

PREFIX: Dr. N	As. 🗆 Mrs. 🔲 Mr.			
			THANK YOU!	
FIRST NAME		MI	We'd like to recognize you in our publications.	
LAST NAME		SUFFIX	Please tell us how you'd like your name to appear:	
HOME ADDRESS	Check if this is a new address	АРТ. #	I wish to remain anonymous in publications.	
CITY	STATE	ZIP	Are you a 10+ year United Way donor?	
PREFERRED PHONE	🗆 Land (Home) 🔲 Business 🔲 Cell		We want to honor you through our Loyal Contributions Program. What year did you start giving to United Way?	
PREFERRED EMAIL ADI	DRESS		YEAR	
EMPLOYER		EMPLOYEE ID #		
2 PERSONAL A CHECK 3 BILL ME P	Hease visit YourUnitedWay.org OR 4 Itached and payable to United Way Image: Construction of the second	PAYROLL DEDUCTION (Per Pa AMOUNT PER PAYCHECK \$1000 \$250 \$100 \$50 \$25 \$10 Other \$	y Period) # OF PAY PERIODS X = \$	
I want to support a sp INDICATE YOUR PREFERENCE I Another Community A Would you like to desi	AND/OR ADD/OR ADD/OR ADD/OR ADD/OR AGENCY I wish to remain anonymous to the agency gnate funds to 501(c)(3) community agency? of \$24 is required to give directly to an agency	\$\$	Total here should match TOTAL ANNUAL GIFT from above	
Step 3	Your Signature			

SIGNATURE

No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2 or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.

DATE

THANK YOU FOR SUPPORTING YOUR UNITED WAY Mail form to: P.O. Box 6388, Richmond, VA 23230 | 804-771-5820 YourUnitedWay.org | customerservice@YourUnitedWay.org

