



Campaign Pledge Form

MY INFORMATION

Please print and sign firmly in blue or black ink.

Mr. Ms. Mrs. FIRST NAME M.I. LAST NAME SUFFIX

HOME ADDRESS CITY STATE ZIPCODE Home Work Cell

PREFERRED PHONE PREFERRED E MAIL When we keep in touch with you by e-mail, you'll stay informed and we'll save printing and paper costs, so more of your contribution goes directly to those who need it.

LOYALTY RECOGNITION

I have given to United Way since: (Insert year you began giving)

I/we wish our gift to be anonymous

COMPANY NAME

IT'S EASY TO GIVE

Please choose A, B, C or D. (See back for additional information)

A. Cash/check (Make check payable to United Way of Erie County)

Amount: Check number: Check date: \$

C. Payroll Deduct

\$ Total Pledge Amount \$ Per Pay Period

B. EASY-PAY

(Please select one payment option)

Bill Me Credit Card

\$ Monthly \$ Quarterly \$ One-Time

D. KEEL CLUB LEADERSHIP GIVING

With your gift of \$500 or more, United Way will recognize you as a Keel Club Leadership Giver.

Please combine my gift with my spouses's / partner's gift

For your privacy and security, please visit our website Donate Page at www.uwerieco.org to make a secure credit card contribution. Please return this form with the Credit Card Box checked. This is for accounting purposes, you will not be charged again.

| SPOUSE'S/PARTNER'S FIRST & LAST NAME | | SPOUSE'S/PARTNER'S EMPLOYER | |
|--------------------------------------|-----------------|-----------------------------|-----------------|
| Ensign | \$500 - \$999 | Captain | \$2500 - \$4999 |
| Lieutenant | \$1000 - \$1499 | Commodore | \$5000 - \$7400 |
| Commander | \$1500 - \$2499 | Admiral | \$7500 - \$9999 |
| Alexis de Tocqueville Society | | | \$10000 - Up |

\$ My Total Gift

PLEASE CHOOSE HOW YOU WANT TO INVEST IN YOUR COMMUNITY

% UNITED WAY FUND Investing your gift where it will have the greatest community impact

% EDUCATION Building stronger families, achieving potential through education

% HEALTH & SAFETY Protecting seniors from harm, improving access to healthcare

% INCOME Reducing barriers to employment, supporting financial stability

% DESIGNATED CONTRIBUTION

100% TOTAL

AGENCY NAME

AGENCY ADDRESS

You may direct a portion of your contribution to support a United Way partner agency, or 501(c)(3) nonprofit tax- exempt organizations that meet specific criteria (subject to verification at (419) 625-4672). Contributions may revert to the United Way of Erie County if the designated agency does not qualify or cannot be located.

MY SIGNATURE (REQUIRED)

DATE

Thank you for your contribution through United Way.

No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records, and a copy of your pay stub, W-2 or other employer document showing the amount withheld and paid to a charitable organization. United Way of Erie County is a non-profit 501(c)3 organization. Tax ID 34-4443835