

United Way Pledge Form

New Employee

Give. Advocate. Volunteer.
LIVE UNITED



First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Employer: _____ Telephone (work/home/cell): _____

Personal Email Address: _____

Please return this form to your
Human Resources Department

Signature: _____ Date: _____

PAYROLL DEDUCTION	Total: \$ _____
Gift amount: (per pay period)	
<input type="checkbox"/> \$25	<input type="checkbox"/> \$10
<input type="checkbox"/> \$20	<input type="checkbox"/> \$5
<input type="checkbox"/> \$15	<input type="checkbox"/> \$ _____
Number of Pay Periods Per Year _____	

AUTOMATIC BANK PAY	Total: \$ _____
Gift amount:	
<input type="checkbox"/> \$25	<input type="checkbox"/> \$10
<input type="checkbox"/> \$20	<input type="checkbox"/> \$5
<input type="checkbox"/> \$15	<input type="checkbox"/> \$ _____
START DATE _____ <i>(deductions will begin January 1st unless indicated)</i> <i>Transactions will be deducted on the 1st day of the month.</i>	
Bank Gift deducted from:	
<input type="checkbox"/> checking (attach voided check)	<input type="checkbox"/> saving
ACCT # _____	ROUTING # _____

BILLED GIFT (\$50 minimum)	Total: \$ _____
<input type="checkbox"/> annually <input type="checkbox"/> quarterly <input type="checkbox"/> monthly	
START DATE _____ <i>(deductions will begin January 1st unless indicated)</i>	

CREDIT CARD	Total: \$ _____
To donate by Credit Card: Please list a daytime phone number where a United Way staff member can reach you to collect your credit card information.	
DAYTIME PHONE _____	BEST TIME TO CALL _____

CASH/CHECK	Total: \$ _____
<input type="checkbox"/> cash <input type="checkbox"/> check (payable to United Way of Central Minnesota) <i>(your check may be processed as an electronic debit from your account)</i>	

Our privacy pledge to you: Information you share with us is used only to properly credit your contribution. We NEVER sell, rent or exchange information about you with anyone without your permission. No goods or services have been received in exchange for your gift · Please retain a copy for your records.

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