

# PLEDGE FORM

Please complete the following information. Your information will not be sold or used in any unauthorized way.

## 1 YOUR INFORMATION

FIRST NAME		MI		LAST		
HOME ADDRESS						
CITY		STATE		ZIP		
PREFERRED PHONE				<input type="radio"/> MOBILE	<input type="radio"/> HOME	<input type="radio"/> WORK
PERSONAL EMAIL		WORK EMAIL				
COMPANY						

## 2 YOUR GIFT

### MY PLEDGE TO UNITED WAY

TOTAL GIFT \$ \_\_\_\_\_

#### LEADERSHIP GIVING

- **\$25,000+** Major Gifts Society
- **\$15,000** Director's Circle
- **\$10,000** Tocqueville Society
- **\$5,000** Community Champion
- **\$2,500** Community Partner
- **\$1,000** Community Leader

## 3 PAYMENT OPTIONS

- PAYROLL DEDUCTION** My pay period is:
- Weekly (52/year)       Twice a month (24/year)
- Every two weeks (26/year)       Monthly (12/year)
- Other \_\_\_\_\_

- CREDIT/DEBIT CARD**
- Make a secure credit card donation at [unitedwaygreaterclt.org/give/#fulfillmypledge](http://unitedwaygreaterclt.org/give/#fulfillmypledge)

- ENCLOSED CHECK** # \_\_\_\_\_
- Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
- Payable to United Way of Greater Charlotte.

- BILL ME** (\$100 minimum, personal email required)
- \_\_\_\_\_
- Pledge reminders emailed by the 15<sup>th</sup> of each month*
- One Time       Monthly       Quarterly       Semi-Annually
- First billing date (MM/YYYY): \_\_\_\_ / \_\_\_\_

- SECURITIES/STOCK**
- Visit [unitedwaygreaterclt.org/donate-stock](http://unitedwaygreaterclt.org/donate-stock) to transfer securities, stock certificates or mutual funds to United Way of Greater Charlotte.

- DONOR ADVISED FUND**
- I will be recommending a grant from \_\_\_\_\_ (institution name)
- in the amount of \$ \_\_\_\_\_ in the year \_\_\_\_\_.

## 4 ACKNOWLEDGEMENT

- Please list my/our name(s) as:  
(Example: Mr. and Mrs. John Doe or John and Jane Doe)
- \_\_\_\_\_
- Please recognize my gift as "Anonymous."
- I am interested in learning about the Legacy Society (for donors making planned/estate gifts)

## 5 SIGNATURE

**SIGNATURE** Required

**DATE**

#### OPTIONAL: DIRECT MY CONTRIBUTION TO ANOTHER NONPROFIT:

Only complete this form if you would like to designate your donation or a portion of your donation to an approved 501(c)3 health and human services organization. The total gift amount listed below must equal the total gift amount listed above. Note: Designations below \$250 will be applied to United Way of Greater Charlotte's community impact efforts.

- \$ \_\_\_\_\_ (amount) to United Way of Greater Charlotte
- \$ \_\_\_\_\_ (amount) to ORGANIZATION NAME \_\_\_\_\_ EIN # (REQUIRED) \_\_\_\_\_
- Please share my name and address with designated organization.

Thank you for your contribution to United Way. No goods or services were provided in exchange for this contribution. For contributions made through payroll deductions, 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. Please consult your tax advisor for more information.

Financial information about this organization and a copy of its license are available from the State Solicitation Licensing Branch (888) 830-4989. The license is not an endorsement from the state.

**THANK YOU!**