

Individual Pledge Form

Mr. Mrs. Ms. Other _____ FIRST NAME, MI, LAST NAME

HOME ADDRESS

CITY, STATE, ZIP

HOME PHONE NUMBER

United Way respects your privacy and will not share your personal information with third parties.

Mr. Mrs. Ms. Other _____ FIRST NAME, MI, LAST NAME

ADDITIONAL DONOR NAME Home E-MAIL

DIRECT DONATION or INVOICE \$ _____

Cash/Personal Check (*payable to Licking County United Way*)

Send Invoice

Stocks & Bonds (*call 740-345-6685 for details*)

Credit Card

VISA MC AMEX DISCOVER

EXPIRES MONTH/YEAR

____/____

SECURITY CODE

Charge my credit card/invoice me quarterly (minimum donation of \$200 charged in March, June, September & December)

Charge my credit card/invoice me annually (minimum donation of \$50) _____ MONTH/YEAR

Billing Address for Credit Card: Same as above Other _____

SIGNATURE/DATE _____



I AM A DIAMOND DONOR! Please list me/us as a United Way Diamond Donor because I/we have been giving to United Way for 25 years or more!

LEADERSHIP RECOGNITION

A combined gift of \$500 or more qualifies as a Leadership Gift

Tocqueville Society
(\$10,000 +)

Sylvia Flory Sinsabaugh
(\$5,000 – \$9,999)

Gold Circle
(\$2,000 - \$4,999)

Silver Circle
(\$1,000 - \$1,999)

Bronze Circle
(\$500 - \$999)

Combine my gift with that of:

_____ Name(s)

List me/us in the leadership directory:

_____ Name(s)

I/we prefer to remain anonymous

OPTIONAL Please direct all or part of my gift to an organization of my choice. (*Minimum gift of \$50 per designation*) Eligible organizations must be recognized as a public service charity by the IRS; tax exempt under IRS section 501(c)(3); registered as a charitable organization with the Ohio Attorney General; provide health and human services and located in the State of Ohio.

Thanks for investing in your community!

Please do not release my contact information to the above organization or to another United Way.