



United Way of St. Charles
 13207 River Road Luling, LA 70070
 Phone: 985-331-9063 Fax: 985-331-9069
 WWW.UWAYSC.ORG

REACH OUT A HAND TO ONE AND INFLUENCE THE CONDITION OF ALL

LIVE UNITED™

Pledge Form

Employer _____

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|
 MR/MRS/MS/DR FIRST NAME MI LAST NAME

I do not wish to receive updates from the United Way.

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|
 MAILING ADDRESS (For credit card charges, address listed must be your billing address.) CITY

I prefer my gift remain anonymous.

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|
 STATE ZIP HOME PHONE EMAIL ADDRESS

2 WAYS TO GIVE PLEASE SELECT PAYROLL DEDUCTION OR A DIRECT GIFT.

EASY PAYROLL DEDUCTION

My total annual gift

AMOUNT \$ _____

A. I want to contribute the following amount each pay period:

\$50 \$25 \$10 \$5

Other \$ _____

B. I pledge _____ % of my salary, for a total gift of \$ _____

DIRECT GIFT

AMOUNT \$ _____

Direct gift paid by:

- Cash
- Personal check (payable to "United Way of St. Charles")
- Credit Card (fill out info below)

Name (as appears on credit card) _____

Card # _____

Expires ____/____ Security Code _____

MY GIFT OF \$500 OR MORE

qualifies me to enter a drawing of great prizes.

PLEASE CHOOSE HOW YOU WANT TO INVEST IN YOUR COMMUNITY

— option A —

UNITED WAY OF ST. CHARLES COMMUNITY INVESTMENT

All funds stay in St. Charles Parish to support United Way agencies & programs.

AMOUNT \$ _____

— option B (must be \$100 or more per agency) —

Restricted Contribution— Agency

AMOUNT \$ _____

Name & Address _____

Restricted Contribution— Other United Way

AMOUNT \$ _____

Name & Address _____

Signature _____ Date _____

Please check the accuracy of all your entries. Thanks for investing in the United Way!

Our organization is a 501(c)3 and your donation is tax-deductible.

White— United Way Yellow— Employer Pink— Employee