

PLEDGE FORM



United Way of
Kankakee & Iroquois Counties

Please complete the required information so we may properly record your gift.
(Your privacy is important to us. Your information will not be sold or used in any unauthorized way.)

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NAME	<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MS.	FIRST	MI	LAST			
HOME ADDRESS				BIRTHDATE (MM/DD/YYYY)	/	/	
CITY				STATE		ZIP	
PREFERRED PHONE				<input type="checkbox"/> MOBILE <input type="checkbox"/> HOME <input type="checkbox"/> WORK			
PERSONAL EMAIL			WORK EMAIL				
COMPANY			TITLE				

YES, I want to receive United Way's eNewsletter, featuring local updates and stories about how my investment is building a stronger community.

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MY PLEDGE TO UNITED WAY

I want to build a stronger community with a donation to the United Way of Kankakee and Iroquois Counties in the amount of:

\$30 \$20 \$15 \$10 \$5 \$3 Other _____ MY TOTAL PLEDGE \$ _____

Amounts listed above are pledges per pay period.

PAYROLL DEDUCTION

CHECK Personal checks can be made payable to **United Way of Kankakee & Iroquois Counties**

CREDIT CARD

Make a secure credit card donation via our website at: myunitedway.org/givenow



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PLEASE DIRECT MY GIFT

You may skip this section if you would like United Way to allocate your donation to the most pressing needs on your behalf.

BY IMPACT PILLAR

- Area of greatest need
- Education
- Financial Stability
- Health

BY COUNTY

- Kankakee County
- Iroquois County
- Both Counties

BY INITIATIVE

- Success By 6
- Women United*

*A gift of \$60 or more designated to Women United qualifies you as a member for one year! Learn more at:

myunitedway.org/women-united

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TO A SPECIFIC AGENCY: Name of Agency: _____ City: _____ State: _____ Zip: _____

- Recognize my gift as "Anonymous."
- Combine my gift with my spouse/partner's giving. Please list both names below. (Your spouse does not need to be an employee of Olivet in order for your giving history to be combined.)

My/our name(s): _____

(Examples: Mr. and Mrs. John Doe or John and Jane Doe)

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SIGNATURE

Required

DATE