# UNITED IN PURPOSE

# **UNITED WAY PLEDGE FORM**

Mr./Mrs./Ms./Dr.	First Name	MI	Last Name

Home Address (For credit card charges, address listed must be your billing address.)

State

City

Cell Phone

Company Name

Zip

How is your contribution making a difference? Provide your email address and we'll keep you informed.

Home Email Address

Signature

#### I'm Interested in Learning About

United Way Women United<sup>®</sup> ALICE<sup>®</sup> (<u>A</u>sset Limited, Income Constrained, Employed)

#### **Act Now For ALICE**

#### **TOTAL PLEDGE:** \$

- Payroll Contribution Amount each pay period: \$\_\_\_\_\_ Number of pay periods per year: \_\_\_\_\_\_

  I will make a one-time payroll deduction gift of: \$\_\_\_\_\_\_
- **Cash Personal Check** (make payable to United Way of Northern New Jersey)
- □ Credit Card: □ VISA □ MC □ AMEX □ DISCOVER Credit Card#:\_\_
  - Exp Date:\_\_\_\_\_ Security Code:\_\_\_\_\_ Signature: \_\_
- □ Securities (call 973.993.1160, x522 when you are ready to transfer funds)
- □ My Gift of \$250 or More (to join United Way Women United)
- □ My Gift of \$1,000 or More (to join United Way's Leadership Circle)
- □ My Gift of \$10,000 or More (to join the national Tocqueville Society)
  - □ When recognizing my gift, please list my/our name(s) as follows:

I prefer to give my gift anonymously

#### Choose How You Want to Invest Your Donation

- lacksquare Help area households struggling to afford the basics by donating to United Way
- Designate your gift to another nonprofit organization (consider donating a portion to United Way)

Agency Name and Address (or Agency Code): \_\_\_\_

Amount \$\_\_

**NOTE:** Designations may be made to any entity that has a valid 501(c)(3) registration and is in compliance with the USA Patriot Act. Funds designated to agencies failing to meet compliance requirements will be retained by United Way for greater community impact in northern New Jersey. Gifts to agencies outside the United Way system may be subject to a fee of 7%, not to exceed \$150, to offset processing and fundraising costs. We encourage a minimum donation of \$25 for all designated gifts.

### Questions

For questions, email **George.Xuereb@UnitedWayNNJ.org** or call **973.993.1160, x117**. All completed forms should be mailed to: United Way of Northern New Jersey, P.O. Box 6835, Bridgewater, NJ 08807.

Information concerning this solicitation is filed with the attorney general for the state of New Jersey and can be obtained by calling 973.504.6215. Registration with attorney general does not imply endorsement.



## **#UnitedForALICE**



United Way of Northern New Jersey