

CAMPAIGN PLEDGE CARD — Please fill out completely. Home address must be included to receive *Caring Club®* card.

**United Way
of Williams County**



www.unitedwaywc.org

Name _____ Home Phone _____

Home Address _____

City _____ State _____ Zip _____

Signature _____ Date _____

Employer _____ **TOTAL GIFT** _____

Thomas M. Herman Leadership Giving Circle

Even with a successful campaign and excellent corporate support, individual financial generosity makes a real difference to those in need. Corporate leaders and community champions give more than their share each year, will you? We will include you in the recognition program, if you so choose.

- PLATINUM** \$5,000+ Annually
- DIAMOND** \$2,500 – \$4,999 Annually
- GOLD** \$1,000 – \$2,499 Annually
- SILVER** \$500 - \$999 Annually

Please check one for Leadership Recognition:

- I wish to remain anonymous.
- You may include my name among the leadership givers.

_____ *Please list name(s) as you would like it to appear in the program.*

Optional Designations

I wish to designate \$ _____ to the following agency:

_____ *(must name a UWWC agency)*

I wish to designate \$ _____ to the United Way
of _____ County.

Payroll Deduction

I authorize my employer to deduct from my pay:

Gift per pay period \$ _____

No. of pay periods per year _____

Cash or Check

Please enclose cash or check made payable to
United Way of Williams County.

Direct Bill

Please bill me at the above address *(check one)*:

- Quarterly Installments *(minimum \$125 quarterly)*
- Biannual Installments *(minimum \$250 biannually)*
- Annual Gift one time bill *(minimum \$500 annually)*

Date to be billed: _____
Mo. Yr.

Electronic Funds Transfer

You may make a gift by authorizing a monthly transfer directly from your account. *(Please also include a VOIDED check.)*

Bank Routing Number _____

Bank Account Number _____