

# 2020/2021 United Way of the Kearney Area Pledge Form

4009 6th Ave., Ste. 19

Kearney, NE 68845

(308) 237-6840



Pledge Online at [www.uwka.org](http://www.uwka.org)

## 1 MY INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## 2 MY GIVING

### 1: Easy Payroll Deduction

Employer: \_\_\_\_\_ Employer ID: \_\_\_\_\_

I pledge the following amount for \_\_\_\_\_ pay periods.

\$20     \$10     \$5     \$2     Other: \$ \_\_\_\_\_

My total annual gift: \$ \_\_\_\_\_

### 2: Other Payment Options

Check     Cash     Credit Card     Direct Bill/Auto Withdrawal

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Please bill me in the amount of \$ \_\_\_\_\_ Bill beginning (MM/YY): \_\_\_\_\_

Monthly     Quarterly     Semi-annually     One-time

My total annual gift: \$ \_\_\_\_\_

## 3 MY DESIGNATION

Your pledge will automatically be invested in community programs as directed by trained volunteers unless you select to designate. (Due to processing designations must be a minimum of \$20).

Please direct my donation to the following program (listed inside):

Agency: \_\_\_\_\_ \$ \_\_\_\_\_

Contingent upon the organization meeting the eligibility requirements for 501 (C)(3) status.

An 8% processing fee will be assessed from designations to non-United Way agencies.

## 4 MY RECOGNITION

My gift of \$500 or more qualifies me as a LEADERSHIP GIVER.

- Gold \$3,000-\$4,999     Bronze \$1,000-\$1,999  
 Silver \$2,000-\$2,999     Torch Bearer \$500-\$999  
 I prefer my name remain anonymous

Please list my name as: \_\_\_\_\_

## 5 MY SIGNATURE

Date: \_\_\_\_\_