



United Way
Manitowoc County, Inc.

PLEDGE FORM

1 MY INFORMATION *(Please print clearly)*

First Name _____ Last Name _____

Home Address _____ Phone _____

City/State/Zip _____

Company/Employer _____ I am retiring in the next 12 months.

Personal Email _____ Subscribe me to your quarterly newsletter!

Combine my gift with my spouse/partner:

Name _____ Company/Employer _____

2 MY INVESTMENT

PAYROLL DEDUCTION

I authorize my employer to deduct
\$ _____ per pay period

I receive my paycheck:

- Weekly (52 pays)
- Bi-Weekly (26 pays)
- Bi-Monthly (24 pays)
- Monthly (12 pays)
- Other (_____ pays)

Total Pledge \$ _____

DIRECT CONTRIBUTION

I have enclosed the following
amount:

Check \$ _____
(Please make checks payable to
United Way Manitowoc County)

Cash \$ _____

Total Pledge \$ _____

BILL ME

(Home address required,
\$25 per quarter minimum)

Once in the month of
_____ 20_____

Quarterly (4 payments)

Total Pledge \$ _____

3 MY IMPACT *(Optional)*

Community Action Fund

Use my gift the most
effective way.

Basic Needs

Early Childhood Connections & Literacy

Volunteer Connection Center

Youth Social & Emotional Well-being

4 DONOR RECOGNITION

Annual Leadership Giving Levels:

- **Tocqueville Society** (\$10,000 or more)
- **Champion** (\$5,000 - \$9,999)
- **Game-changer** (\$1,000 - \$4,999)
- **High Five** (\$500 - \$999)
- **Hand-raiser** (\$1 - \$499)

I/we prefer all my/our gifts to remain anonymous.

For recognition, my/our name should read:

My Signature _____ Date _____

No goods or services were provided for this contribution. If you need a receipt for your tax records, please keep a copy of this form. Consult your tax advisor for more information. Thank you for supporting United Way Manitowoc County! Your gift helps us build a stronger, more resilient county. Questions? Please call United Way Manitowoc County at (920) 682-8888, email info@unitedwaymanitowoccounty.org, or visit our office at 21 E. Waldo Blvd., Manitowoc.