

PLEDGE FORM

FOR WORKPLACE DONORS

Subscribe to our
Monthly E-Newsletter!



WHAT IS YOUR INFORMATION?

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Other: Email:

First Name: Last Name: Suffix:

Spouse: Home Address:
City, State, Zip Code

Phone: ☐ Cell ☐ Home ☐ Work

Your Employer: Spouse's Employer:

HOW WOULD YOU LIKE TO BE RECOGNIZED?

Recognition for Annual Gifts of \$500 or greater:

☐ Combine my gift with my spouse. ☐ Do NOT combine my gift with my spouse. ☐ I wish to remain anonymous.

Publish My Name As (include spouse's name if desired):

WHAT IS YOUR PLEDGE TO OUR COMMUNITY?

OPTION 1 - PAYROLL DEDUCTION

Select the contribution amount. Payroll Deduction is available through company campaigns. Donors do **NOT** receive statements.

HOW MUCH?

☐ \$100 ☐ \$75 ☐ \$50 ☐ \$25
☐ \$10 ☐ Other Amount:

☐ 1-Hour Pay
Est. Amount:

☐ 2-Hours Pay
Est. Amount:

HOW OFTEN?

☐ Biweekly (26/year)
☐ Bimonthly (24/year)
☐ Monthly (12/year)
☐ Other:

MY TOTAL GIFT IS:

OPTION 2 - DONATE NOW

Select an option below.

☐ Cash (enclosed):

☐ Check (enclosed):

OPTION 3 - GIVE ONLINE

Visit unitedwaynela.org/donate



SCAN THE QR CODE

Together, we
strengthen
Northeast Louisiana

MY TOTAL ANNUAL GIFT IS: To Authorize Your Pledge, Please Sign:

THANK YOU FOR YOUR SUPPORT!

Signature

Date

**ADDITIONAL
SUPPORT AND
RESOURCES**

CALL

Dial 211 from your phone
Available 24/7, 365

TEXT

Text your zip code to 898-211
Available M-F 8 a.m. - 5 p.m.

SCAN THE QR CODE

Scan for local resources
Available 24/7, 365 days

