



LIVE UNITED DONATION PLEDGE FORM



A UNITED Northeast Georgia region where everyone has the opportunity and resources to grow, succeed, and thrive.

MY INFORMATION:

NAME (LAST, FIRST)

COMPANY

HOME ADDRESS

CITY STATE ZIP CODE

EMAIL ADDRESS

PHONE NUMBER

PAYMENT METHOD (choose one)

PAYROLL DEDUCTION

I WILL DONATE THE FOLLOWING PER PAY PERIOD

*contributions will be deducted from each paycheck until told otherwise

\$20

\$15

\$10

OTHER \$ _____

$$\begin{matrix} \$ \\ \text{DONATED} \\ \text{PER CHECK} \end{matrix} \times \begin{matrix} \text{\# PAY PERIODS} \\ \text{PER YEAR} \end{matrix} =$$

DONATION TOTAL
per year
\$ _____

ONE TIME GIFT

CASH (enclosed)

CHECK PAID TO UNITED WAY OF NORTHEAST GEORGIA (enclosed)

DONATED ONLINE @ unitedwaynega.org _____ / _____ / _____
DONATION DATE

DONATION TOTAL
\$ _____

SIGN & DATE

SIGNATURE

_____/_____/_____
DATE