

## UNITED WAY OF ADAMS COUNTY, 218 E. Monroe Street Decatur, IN., 46733, (260) 728 - 2056

$\int$	Mr. Mrs. Ms. Dr.
MY INFORMATION	HOME ADDRESS CITY / STATE /ZIP
MA	PHONE EMPLOYER
, OR	I am retired I am planning to retire in the next 12 months. Please provide your e-mail address so we can show you how your contribution is making a difference.
MY INF	
$\bigcirc$	Total annual giving of \$500 or more qualifies for designation as a Leadership Giver!
	PAYROLL DEDUCTION OPTIONS         I would like to give one hour's pay per month. Amount \$ Total pledged amount (x12) \$
MY PANMENT OPTIONS	<ul> <li>I would like to give \$ per pay period (\$5.00, \$10.00, \$20.00, \$50.00, \$100.00)</li> <li>I receive my paycheck: U Weekly (52 pays) Every two weeks (26 pays) Monthly (12 pays)</li> <li>Total pledged (Amount x number of pay periods) \$</li> </ul>
0	OTHER GIVING OPTIONS
	<ul> <li>My gift of \$ is attached: □ Cash □ Check payable to United Way of Adams County</li> <li>Please bill me for my gift of \$: □ Once □ Quarterly (Please be sure complete mailing address is included in Section 1.)</li> </ul>
MMI	Credit Card: For your protection we can only accept your credit card information on our web site : <u>unitedwayofadamscounty.com.</u>
MY	For gifts of stock or real estate or to remember United Way of Adams County in your will, please call us at 260-728-2056.
$\bigcirc$	OPTION A
B	<b>OPTION A</b> <ul> <li>I want to help the most people possible by contributing to the United Way of Adams County General Fund.</li> </ul>
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If you choose to contribute by payroll deduction, IRS regulations require you to retain a copy of this pledge form, in addition to your pay stub or W-2 form, to document your gift to UWAC (EIN 35-1846627) DISTRIBUTION: WHITE COPY - UNITED WAY OF ADAMS COUNTY OFFICE, YELLOW COPY – EMPLOYER, PINK COPY - DONOR