

COMPANY NAME: _____

NAME (Please Print): Mr /Mrs / Ms _____

HOME MAILING ADDRESS: _____

E-MAIL ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

SIGNATURE: _____

PERSONAL PLEDGE CARD

Wiregrass United Way
P.O. Box 405
Dothan, AL 36302
(334) 792.9661
For Social Service Help Dial: 2-1-1

PAYROLL DEDUCTION

FAIR SHARE

___ One hour pay (\$ _____) per month

___ One percent pay per month (\$ _____)

\$ _____ Per pay period

My pay period is ___ Weekly ___ Every other week

___ Twice Monthly ___ Monthly

___ One time (\$ _____)

Yearly Pledge \$ _____

DIRECT PAYMENT

___ Check/Cash attached \$ _____

Make Checks Payable to Wiregrass United Way

___ Bill me (\$25 Minimum per quarter)

___ Once on _____

___ Monthly (total pledge divided by 12)

___ Quarterly (Jan., April, July, Oct.)

Yearly Pledge \$ _____

LEADERSHIP SOCIETY

___ Committed Giver (\$500-\$999)

___ Red Feather (\$1,000-\$1,999)

___ Silver Feather (\$2,000-\$3,499)

___ Gold Feather (\$3,500-\$4,999)

___ Platinum Feather (\$5,000-\$9,999)

___ Alexis de Tocqueville (\$10,000 +)

___ I do not wish for my name to be published in printed leadership material.

TO DESIGNATE YOUR GIFT, USE THE CODES SHOWN IN THE CAMPAIGN BROCHURE. A MINIMUM PLEDGE OF \$25 PER AGENCY IS REQUIRED TO DESIGNATE.

Code	\$ _____	Total Amount
Code	\$ _____	Total Amount

Other United Way: _____



Wiregrass United Way THANK YOU

I do not wish to be acknowledged for my gift.

(All contributions of \$250 or more will receive a tax receipt)
No goods or service have been provided for contributions received.

WHITE-PAYROLL YELLOW-UNITED WAY PINK-DONOR