



# UNITED WE CARE PLEDGE FORM

Thank you for your donation. Please complete this form, print, sign, and give it to your agency's Campaign Coordinator.



## Please check the United Way region in which you work

- ☐ Lewiston Area  
☐ Panhandle/Coeur d'Alene

- ☐ SW Idaho/Treasure Valley  
☐ Moscow/Latah County  
☐ Other \_\_\_\_\_

- ☐ Pocatello/Southeastern Idaho  
☐ Idaho Falls Area

Name

First

Middle

Last

Work E-mail

State Agency

Home Address

City

State

Zip

Work Phone

**My pledge details:** I pledge a total gift of: \$ \_\_\_\_\_

- ☐ This is 1/2% of my gross income    ☐ This is 1% of my gross income    ☐ This is 2% of my gross income    ☐ Not Applicable

## Here's how I'd like to make my donation

- ☐ **Payroll Deduction** (26 periods, starting January)

Pledge Per Pay Period = \$ \_\_\_\_\_

- ☐ **Please Bill Me** (Starting January)

Monthly    ☐ Quarterly    ☐ Other: \_\_\_\_\_

- ☐ **Cash/Check:** Please make check payable to the United Way Regional Office you selected above.

## OPTIONAL: Tax-Exempt Charitable Organization(s) to which I designate my gift

(if you wish to add more organizations, please print an additional form)

**Organization** (and address if not local)

\$

\$

\$

\$

\$

\$

\$

- ☐ I authorize my name and address released to the organization(s) above.

Visit the State Employees' Charitable Giving Campaign website at [www.unitedwecare.idaho.gov](http://www.unitedwecare.idaho.gov)

**My Pledge Authorization:** Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for giving through the United We Care Campaign.