

# PLEDGE FORM

**LIVE UNITED**  
RESPOND. RECOVER. REIMAGINE. REBUILD.



## TELL US ABOUT YOURSELF

FIRST NAME*				LAST NAME*			
HOME ADDRESS*					MONTH OF BIRTH	If you want us to celebrate with you	
CITY*				STATE*			ZIP*
PREFERRED PHONE*							<input type="checkbox"/> Home <input type="checkbox"/> Mobile <input type="checkbox"/> Work
PERSONAL EMAIL*							<input type="checkbox"/> I prefer electronic communication
COMPANY*					DEPT./BRANCH		
<input type="checkbox"/> I would like to be recognized with my spouse/partner.				NAME			COMPANY
PRINT HOW YOU WOULD LIKE TO BE RECOGNIZED IN PUBLICATIONS*				<input type="checkbox"/> I wish to remain anonymous			
AGE RANGE	<input type="checkbox"/> Under 30 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-59 <input type="checkbox"/> 60+			MEMBER OF ORGANIZED LABOR	<input type="checkbox"/> Yes <input type="checkbox"/> No		
AREAS I CARE ABOUT MOST	<input type="checkbox"/> Early Childhood Success <input type="checkbox"/> Youth Success <input type="checkbox"/> Health & Well-Being <input type="checkbox"/> Financial Stability						

\* Required Field

## MANAGE YOUR DONATION

**PAYROLL DEDUCTION** \_\_\_\_\_ total gift  
 \$ \_\_\_\_\_ per pay period × \_\_\_\_\_ pay periods annually = total gift  
 Minimum pledges - \$1.00 per week

**CREDIT/DEBIT CARD** \_\_\_\_\_ total gift  
 Make a secure credit card donation at [unitedwaygcr.org/pledge](http://unitedwaygcr.org/pledge) or call **518-456-2200**, and submit this form to the appropriate person in your office.

**CHECK** \_\_\_\_\_ total gift  
 Personal check made payable to United Way of the Greater Capital Region (remit to address below).

**SECURITY/STOCKS**  
 Please contact me with details on how to transfer.

**BILL ME QUARTERLY AT MY HOME ADDRESS (ABOVE)** \_\_\_\_\_ total gift

## BE A LEADER

PLEASE SEND ME INFORMATION ON:

**United to Volunteer**  
 A free platform to find live volunteer opportunities in your community that match your interests and skill sets.

**Women United**  
 A network of philanthropic women looking to create change that positively affects local women.

**Emerging Leaders**  
 A network of young professionals looking to make an impact locally.

**Estate Planning**  
 How to include United Way GCR in my estate planning

### GIFT DESIGNATION IS OFFERED AS AN OPTIONAL SERVICE.

**DIRECT \$** \_\_\_\_\_ of my gift to United Way's efforts to continue to respond to immediate needs caused by the COVID-19 pandemic as well as rebuild the community in the long-term.

**DESIGNATE \$** \_\_\_\_\_ of my gift to the following 501(c)(3) nonprofit organization. **AGENCY NAME** \_\_\_\_\_

SIGNATURE

DATE

The CARES Act may allow you to deduct up to \$300 per year in charitable contributions. Please consult your tax advisor for more information.

Please retain a copy of this form for your records. Non-United Way partner organizations are not subject to United Way GCR's accountability review. If your designated agency is unable to accept your donation, we will contact you using the information provided on this form. If we are unable to contact you within 15 days, we will direct your gift to United Way's Community Care Fund. Some designated donations are subject to a nominal processing fee. For updated donor policies, please visit our website at: <https://www.unitedwaygcr.org/terms-and-conditions>.

No goods or services were provided in exchange for this contribution. Our most recent audited financial statements and IRS 990 report are available at [www.unitedwaygcr.org](http://www.unitedwaygcr.org), [www.charitiesnys.com](http://www.charitiesnys.com) or by contacting the Office of the Attorney General, Department of Law, Charities Bureau at (212) 416-8686 or 120 Broadway, New York, NY 10271.

Your privacy is important to us and your information will not be sold or used in any unauthorized way. Please keep a copy of this form for your tax records. Consult your tax advisor for more information.



# THANK YOU!