2023 Donor Pledge Form

Greene County Πn **United Way**



Your Information LAST NAME: FIRST NAME: HOME ADDRESS: EMAIL ADDRESS:

HOME PHONE:	

COMPANY NAME:

Vour Gift

Г	EASY PAYROLL DEDUCTION	CHECK #	(Payable to Greene County	
\$	X	= \$	United Way) Roll over my donation from 2022	
Ψ	Amount Per Pay Number of Pay Periods	Total Gift Amount		
	BILL ME □ Now □One-Time	□ Quarterly in 2023	CASH	
	CREDIT CARD	Discover Discover Mastercard	□ VISA	
	Credit Card Number		Expiration Date MM/YYYY CVV Code	

WORK PHONE:

TOTAL GIFT AMOUNT

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Your Recognition

Your donation of \$500 or more to Greene County United Way qualifies you as a Leadership Giver and your name will be listed as above in our Annual Report as well as on www.greenecountyunitedway.org.

Signature:		Date:		THANK YOU!			
Your Signature No go	oods or services were provided in exc	hange for the contribution. Un	ited Way keeps your inforn	nation confidential.			
			\$				
Designate my gift	mplete Name AND Location			Amount			
Direct my contribution to	a specific focus area □ Financial Stability	□ Health & We	llness				
Greene County United Way Community Impact Fund – The most powerful way to invest in your community!							
Your Impact							
I prefer my gift remain anony	ymous	Do not send a T	hank You				

Greene County United Way ~ 748 East High Street, Waynesburg, PA 15370 ~ Phone: 724-852-1009 ~ Fax: 724-627-3678