

LAKE AREA UNITED WAY PLEDGE FORM

REACH OUT A HAND TO ONE AND INFLUENCE THE CONDITION OF ALL

P.O. Box 1612
230 W Broadway
Street, Suite 200
Muskogee, OK 74402



MY INFORMATION

MR/ MRS/ MS/ DR

FIRST NAME

MI

LAST NAME

HOME ADDRESS

CITY/STATE/ZIP

HOME PHONE

DAYTIME PHONE

EMPLOYER

EMAIL ADDRESS

MY GIFT TO MY COMMUNITY

Please choose one of the following ways to give.

A ☐ EASY PAYROLL DEDUCTION

A total annual gift of \$ _____

I want to contribute the following amount
each pay period:

☐ \$50 ☐ \$30 ☐ \$20 ☐ \$15 ☐ \$10

Other \$ _____ # of pay periods _____

B ☐ CASH or CHECK

A direct gift of \$ _____

☐ Cash (enclosed)
☐ Personal Check

Make checks payable to Lake Area United Way

C ☐ CREDIT CARD

Go to our website:
www.lakeareaunitedway.org

Click on the donation button to
access our secured payment
page and print off receipt to turn
in with your pledge card.

Please check the accuracy of your entries

Thank You for LIVING UNITED!

TOTAL PLEDGE = \$ _____

SIGNATURE _____

DATE _____

☐ Do not release my contribution information to
United Way office.

THANK YOU for your tax deductible gift. Please keep a
copy of this form and a copy of your pay stub, W-2 form
or other document furnished by your employer showing
the total amount withheld for payment to charity, along
with a copy of your pledge card. Consult your tax advi-
sor for more information.

LEADERSHIP GIVING

Please let us know if
you qualify as a
leadership giver.

☐ My gift of \$500 or more qualifies me for
membership in the Leadership Club.

☐ Please list my/our name (s) as follows:

☐ I prefer my gift remain anonymous.

I have been contributing to United Way for _____ years.

INVESTMENT DESIGNATION

Please select how you would like
your gift used in your community.

☐ INFLUENCE THE CONDITION OF ALL!
United Way Community Fund

☐ ENHANCING EDUCATION: Funds in-school youth
development and educational empowerment.

☐ INCREASING FINANCIAL STABILITY: Funds a
supportive network of food & shelter assistance.

☐ PROMOTING HEALTH & WELL-BEING: Funds
intervention, treatment, counseling and rehabilitation.

