

# COMPANY PLEDGE CARD

United Way of Douglas  
& Pope Counties



PO Box 1148, Alexandria, MN 56308

320-763-4840

unitedw@rea-ulp.com

www.uwdp.org

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Contact Person: \_\_\_\_\_ Signature \_\_\_\_\_

Total Donation \$ \_\_\_\_\_ (Payment options on back of card)

\_\_\_ I am a new United Way Donor

\_\_\_ I have been a United Way Donor for 10 years or more

\_\_\_ I have been a United Way Donor for 25 years or more

## I will pay through the following process:

**Direct Gift** \$ \_\_\_\_\_

**Auto Debit** Amount: \$ \_\_\_\_\_

- One time     Monthly (Transfers will be on the 20th of the month)  
 Checking     Savings

Routing # \_\_\_\_\_ Account # \_\_\_\_\_

Financial Institution Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Credit Card**  Visa     MasterCard     Discover

Card # \_\_\_\_\_ Exp \_\_\_\_\_

Signature \_\_\_\_\_

**Bill me**  Quarterly     Annually     Semi-annually (Minimum \$25 or more per quarter)



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\_\_\_ I'm interested in having an employee campaign opportunity.

\_\_\_ I'd like to receive the United Way Newsletter via e-mail.

\_\_\_ Please send information regarding how participate in the allocations process.