# LIVE UNITED

# 2024/25 CAMPAIGN

@unitedwaydouglaspope | www.uwdp.org | 320-834-7800 503 Hawthorne Street, Alexandria MN, 56308

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# **CONTACT INFORMATION**

2024/25 CAMPAIGN

Company Name:	#:
Name:	Expiration Date:
Address:	One time donation Monthly donation
City:Zip:	
Phone:	SIGNATURE (REQUIRED):
Email:	DESIGNATION (OPTIONAL):
Combine my gift with my spouse/partner Spouse/partner name:	United Way does not provide goods or services in consideration for any contribution made to the organization via this pledge form. The expenses associate with processing donor designations are recovered by an assessment for fundraising fees based on actual historical costs in accordance with United Way Worldwide Membershin Standard M.



### Keep me SUStainable

Keep me SUStainable

**PAYROLL DEDUCTION** 

**OTHER PAYMENTS** 

Credit Card

(Continue my gift year over year until I change it.)

\*Over the next year, 26 pay periods.

One time donation - Cash or check

I would like to make a one time gift of: \$\_\_\_\_

I authorize my employer to deduct: \$ per pay period\*

(Continue my gift year over year until I change it.)

## **PAYROLL DEDUCTION**

I authorize my employer to deduct: \$	per pay period*
*Over the next year, 26 pay periods.	

I would like to make a one time gift of: \$\_\_\_\_\_

### **OTHER PAYMENTS**

Worldwide Membership Standard M.

	One time donation - Cash or check
CONTACT INFORMATION	Credit Card
Company Name:	#:
Name:	Expiration Date:
Address:	One time donation Monthly donation
City:Zip:	
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Spouse/partner name:	contribution made to the organization via this pledge form. The expenses associate with processing donor designations are recovered by an assessment for fundraising fees based on actual historical costs in accordance with United Way of Dwylas

United Way of Douglas & Pope Counties