PLEDGE FORM

2	FIRST & LAST NAME
_ _	EMPLOYER
E	UNION AFFILIATION EMPLOYEE ID
- - -	(If applicable) MAILING ADDRESS CITY/STATE/ZIP
	PHONE EMAIL
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L 0 W L 11	EASY PAYROLL DEDUCTION Select amount to donate/paycheck: \$5 \$10 \$15 \$20 \$25 \$50 \$75 \$100 Bronze Leader* Game Changer* Silver Leader* Gold Leader* Platinum Leader* \$(Other amount/paycheck) \$
	IMAGINATION LIBRARY (optional) In addition to my contribution, I would like to sponsor a child for the \$1 \$2 \$5 Other Imagination Library program by adding to each of my payroll deductions.
۔ د	DIRECT GIFT Cash Check (payable to UWNEMN) Credit Card Scan this QR code to donate online and keep your credit card info secure!
	TOTAL GIFT AMOUNT IS \$ RECOGNITION *Recognition levels based on 24 pay periods minimum. Please list my/our name(s) as follows in publications: (Optional: Include family/spouse/significant other.) Recognition levels based on 24 pay periods minimum. I prefer that my gift remain anonymous.
- IAI	DONOR DESIGNTATION (optional) I would like to designate my donation to support one or more UWNEMN programs and/or 501(c)(3) nonprofit organizations:
INI FEGURO	CREATE LASTING CHANGE I would like more information on how to sustain my gift into the future through UWNEMN's Forever Fund. I have included UWNEMN in my will or estate plans.

608 East Drive, Chisholm MN 55719 218-254-3329 | info@unitedwaynemn.org Tax Exempt #41-0908454

>Signature:

Date: