



2024 PLEDGE FORM



Step 1 Your Information

FIRST NAME _____ LAST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIPCODE _____

PREFERRED PHONE _____

PREFERRED EMAIL ADDRESS _____

DATE OF BIRTH (optional) _____

THIS IS (CHECK ONE): AN EMPLOYEE DONATION

EMPLOYER/COMPANY _____

THANK YOU!

We'd like to recognize you in our publications. Please tell us how you'd like your name to appear:

I wish to remain anonymous in publications.

Step 2 Your Gift

Payment Options

Payroll Deduction

Amount Per Paycheck

- \$1 \$20
- \$5 \$25
- \$10 Other \$ _____



Of Pay Periods

26



Total Annual Gift



Designation

My United Way Contribution should go to:



United Way of the Adirondack Region, Inc.
Serving Clinton, Essex and Franklin Counties of NY



United Way of Northwest Vermont
Serving Chittenden, Franklin and Grand Isle Counties in VT



United Way of Northern NY
Serving Jefferson, Lewis and St. Lawrence Counties of NY

Step 3 Your Signature

SIGNATURE _____ *By signing this form I am authorizing the payroll deduction elected on this form.

DATE _____

THANK YOU FOR SUPPORTING YOUR UNITED WAY

United Way of the Adirondack Region, Inc.

45 Tom Miller Road, Plattsburgh, NY 12901
www.unitedwayadk.org |
uwadk@unitedwayadk.org | (518) 563-0028
Serving Clinton, Essex and Franklin Counties of NY

United Way of Northern New York

167 Polk Street, Suite 300, Watertown, NY 13601
315-788-5631
www.unitedway-nny.org
Serving Jefferson, Lewis and St. Lawrence Counties of NY

United Way of Northwest Vermont

412 Farrell Street, Suite 200, South Burlington, VT 05403
802-864-7541 | UNITEDWAYNWVT.ORG
Serving Chittenden, Franklin and Grand Isle Counties in VT