

GIVE. ADVOCATE. VOLUNTEER.
LIVE UNITED



Name _____

Address _____ City _____ State _____ Zip _____

United Way of Johnson County
210 Featherstone • Cleburne, TX 76033
(817) 645-9153 • Fax (817) 641-9600

MY TOTAL PLEDGE:

\$ _____

Please choose the following payment option that works best for you.

OPTIONAL: You may designate your contribution to the following areas of support:

- Investing in our Youth
- Overcoming Crisis
- Health & Wellness
- Empowering Families
- Community Fund

1. Check \$ _____ (Make payable to United Way of Johnson County)
2. Cash \$ _____
3. Bill me \$ _____ monthly \$ _____ quarterly (Minimum \$100)
4. Credit Card Visa Mastercard \$ _____
CC# _____
Expiration date ____/____/____ (Minimum \$50 pledge)
5. Payroll Deduction \$25 \$10 \$5 Other \$ _____
(per pay period)
6. Deduct from my bank account (contact United Way office for Direct Payment
Authorization form - Minimum \$120.00).
Signature _____

- I qualify as a Leader in Giving. *Circle one:*
\$200 up \$500 up \$1,000 up \$5,000 up \$10,000 up
- I would like my name listed in the Leadership materials.
- Check this box if you wish to remain anonymous.

Thank you . . .

. . . your investment helps create lasting results.

White Copy - United Way Yellow Copy - Employer Payroll/Donor