



_____ Transportation

□ \$___ Note: _

1. MY UNITED WAY INVESTMENT							
My Total Annual United Way Pledge = \$					I'D LIKE TO JOIN AN AFFINITY GROUP		
2. MY PAYMENT METHOD (SELECT ON	E)					g retirees and older adults	
ANNUAL PAYROLL DEDUCTION (E	OR	•\$ pe •\$ or		My g qual follo - Ai	gift of \$1,000 an ifies for members wing United Waterican American comen United bung Leaders So	pership in the ay affinity groups: Leadership ciety — includes donors in	
CASH OR CHECK Please attach to pledge form						0+ and donors in their 30s h year required below.	
Please specify:	One-time Payment (Jan. 2	025) 🔲 Monthly Installm	ents 🔲 Quarter	y Installments	Annual Install	ments (over years)	
CREDIT CARD (We accept VISA, Master	Card, Discover & Americar	ı Express)					
CARD # Please specify: One-Time Payment (Jan. 2) You can also visit unitedwaygc.org/donate t 3. MY INFORMATION I'd like to remain anonymous. (Please still	o make a secure gift. Plea	se complete your pledge			Beginning month-ye	ar	
EFIX FIRST NAME		M.I. LAST NA	ME				
EFERRED RECOGNITION NAME (Individual or Family)	PREFERRED E	MAIL ADDRESS (Sc	we can thank yo	u and keep you infor	med about the impact of your gift	
ME STREET ADDRESS	APT NU	IMBER CITY			STATE	ZIP CODE	
PLOYER THDAY (MM-DD-YYYY)		would like more inform				LE MESSAGES TO STAY CONNECTED.	
OUSE'S/PARTNER'S NAME	ODOLIOFIO (DA DTAIL	D'O EMPLOYED			□ Pl	ease make us dual members	
EASE SIGN AND DATE X SIGNATURE	SPOUSE'S/PARTNE	KS EMPLOTER			DATE		
Thank you	ļ U	nited Way will not disclose y	our donor informa			zations receiving designated gift	
YOU CAN MAIL YOUR COMPLET	ED PLEDGE FORM TO UNI	TED WAY OF GREENVILL	E COUNTY (105			itedwaygc.org/designations-poli .E, SC 29607)	
rould like to diseat - 11/2 t - 5	So oron of United W. J.						
vould like to direct all/part of my gift to a specif \$United Way of Greenville Co	•	c: Opportunity Center	□ \$	VITA	□ \$	OnTrack Greenville	

□ \$_____ Housing

□ \$_____Education □ \$_____Childcare