

# 2025-2026 Rice County Area United Way PLEDGE FORM

## STEP 1: My Information

\_\_\_\_\_  
MR/MRS/MS/DR FIRST NAME MI LAST NAME

\_\_\_\_\_  
HOME ADDRESS (For credit card charges, address listed must be your billing address.)

\_\_\_\_\_  
CITY STATE ZIP CODE

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
EMAIL ADDRESS (needed for credit card charges)

\_\_\_\_\_  
HOME PHONE

## STEP 2: My Donation

THANK YOU!

☐ **PAYROLL DEDUCTION**  
\$ \_\_\_\_\_ per pay period x # \_\_\_\_\_ pay periods = \$ \_\_\_\_\_

☐ **CASH or PERSONAL CHECK** Payable to: Rice County Area United Way  
Check # \_\_\_\_\_ Date \_\_\_\_\_ \$ \_\_\_\_\_

☐ **CREDIT CARD** ☐ Visa ☐ MasterCard ☐ American Express  
☐ One time charge  
☐ Monthly charges of \$ \_\_\_\_\_ for \_\_\_\_\_ months starting \_\_\_\_\_ / \_\_\_\_\_  
Card # \_\_\_\_\_  
Exp. Date \_\_\_\_\_ / \_\_\_\_\_ CVC Code \_\_\_\_\_ \$ \_\_\_\_\_  
Billing ZIP Code \_\_\_\_\_

### CONTRIBUTION CALCULATOR BI-WEEKLY (26)

PLEDGE	TOTAL
\$2	\$52
\$3	\$78
\$5	\$130
\$10	\$260
\$15	\$390
\$25	\$650
\$50	\$1,300
\$75	\$1,950
\$100	\$2,600

### OPTIONAL DESIGNATIONS

My TOTAL Annual Gift is \$ \_\_\_\_\_

☐ Direct my funds to an Agency Partner (listed in brochure and [ricecountyunitedway.org/partner-agencies](http://ricecountyunitedway.org/partner-agencies))

☐ Direct my funds to another human services nonprofit

Name \_\_\_\_\_

Address \_\_\_\_\_

☐ I prefer that my gift remain anonymous.

☐ I am retiring this year, please keep in touch  
at this email \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

## STEP 3: My Involvement

Want to know more about getting involved?

Visit us at [ricecountyunitedway.org](http://ricecountyunitedway.org) or check below for more information:

- ☐ Volunteer Opportunities
- ☐ Grant Allocations Panel
- ☐ Board of Directors

Please make a copy of this form for your files.



Rice County Area  
**UNITED WAY**