

# HEAD OF THE LAKES UNITED WAY PLEDGE FORM



424 W. Superior Street, Suite 402 | Duluth, MN 55802  
Duluth: 218-726-4770 | Superior: 715-394-2733 | [www.hlunitedway.org](http://www.hlunitedway.org)

Head of the Lakes  
United Way

## STEP 1 DONOR INFORMATION:

Check here if your contact info has recently changed.

Prefix \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I am Retired. Employer \_\_\_\_\_  I am a Union Member of: \_\_\_\_\_

Please provide your preferred phone number and email address so that we may contact you if we have questions regarding your pledge.

Phone \_\_\_\_\_  Cell  Home  Work  Alt Phone \_\_\_\_\_  Cell  Home  Work  Personal  Work  
 Email \_\_\_\_\_

## STEP 2 CHOOSE YOUR GEOGRAPHIC AREA\*:

Ashland – Bayfield Counties  Greater Duluth  North Shore (Lake & Cook Counties)  Superior – Douglas County

## STEP 3 MAKE YOUR PLEDGE:

TOTAL Annual Contribution: \$ \_\_\_\_\_

Indicate payment method below:

### PAYROLL DEDUCTION

I want to donate the following amount **per pay period**:

\$50  \$25  \$10  \$5  
 Other amount \$ \_\_\_\_\_

My pay period is:

Weekly (52 per year)  
 Twice a month (24 per year)  
 Every other week (26 per year)  
 Other \_\_\_\_\_

### BILL ME

Please send me an invoice:

\$ \_\_\_\_\_  
(\$25 minimum)

Quarterly  
 One Time on: \_\_\_\_\_

mm/yy

### DIRECT GIFT

Cash \$ \_\_\_\_\_

Check \$ \_\_\_\_\_

Check # \_\_\_\_\_

Date \_\_\_\_\_

Make checks payable to:  
United Way

### CREDIT CARD

One-time or recurring CC charge

My credit card form is attached\*

I'll give securely online at:  
[www.hlunitedway.org/donate](http://www.hlunitedway.org/donate)

Please contact me

\*Credit card forms and additional information about online giving can be found at [www.hlunitedway.org/donate](http://www.hlunitedway.org/donate).

### LAKE SUPERIOR LEADERSHIP SOCIETY

An individual or combined gift of \$1,000 or more qualifies you as a **Lake Superior Leadership Society Member!** In addition, the Emerging Leaders program recognizes donors that give \$500 with a commitment of increasing their gift to \$1,000 within 3 years.

SELECT YOUR LEVEL:

Emerging Leader (\$500+)  Visionary (\$3,500-\$4,999)  
 Friend (\$1,000-\$1,999)  Innovator (\$5,000-\$9,999)  
 Pacesetter (\$2,000-\$3,499)  Tocqueville (\$10,000 & above)

Combined Gift with \_\_\_\_\_ Employer \_\_\_\_\_

Recognition: “ \_\_\_\_\_ ”  I/We wish to remain anonymous.

Please use this as my/our names in United Way publications

## STEP 4 REQUIRED SIGNATURE X

By typing my name and date below, I agree to the following pledge amount as listed above.

Date: \_\_\_\_\_

### ADDITIONAL INFO: (OPTIONAL)

AGE RANGE:  18-24  25-34  35-44

45-54  55-64  65-74  75 & older

I am a NEW HIRE.  I plan to RETIRE \_\_\_\_\_  
mm/yy

Please contact me regarding PLANNED GIVING.

PLEASE ADD ME TO THE HLUW EMAIL LIST:

General Head of the Lakes UW e-news

Volunteer Opportunities

DESIGNATIONS: If you would like to designate your gift, visit [WWW.HLUNITEDWAY.ORG/DONATE](http://WWW.HLUNITEDWAY.ORG/DONATE) to view our current partner agencies and fill out/print a designation form. A completed designation form must be attached to your pledge form to be honored.

Original: United Way | Duplicate Copy: Donor/Payroll Dept

Thank you for your contribution to the United Way campaign. No compensation, goods or services have been given to the donor from Head of the Lakes United Way in return for this contribution. If HLUW has any questions about your contribution, you will be contacted at the above phone number/email address. \*Geographic Area: If no area is selected, we will apply your gift to the geographic area corresponding to your provided zip code.

# THANK YOU FOR YOUR SUPPORT!