



2023-2024 Pledge Form

United Way of
Hardin County

MY INFORMATION

MR/MRS/MS/DR FIRST NAME LAST NAME JR/SR DOB (MM/DD/YYYY)

HOME ADDRESS CITY STATE ZIP CODE

PHONE: __HOME __WORK __CELL EMAIL: __HOME __WORK

NAME OF EMPLOYER

FOR RECOGNITION PURPOSES LIST MY/OUR NAME AS

PLEASE CHECK IF APPLICABLE:

- I am a first time donor to United Way
- I am a loyal donor (5+ years,) giving since
- Contact me about United Way's Planned giving program.
- I wish to remain anonymous.
- I'd like to OPT OUT of further info via text & email

MY GIFT TO MY COMMUNITY - Please choose A, B, and/or C below.

LEADERSHIP GIVING LEVELS: Alexis de Tocqueville Society \$10,000+ Platinum \$5,000+ Gold \$3,000+ Silver \$2,000+ Bronze \$1,000+ Emerging Pillar \$500+

A EASY PAYROLL DEDUCTION

A total annual gift of \$_____

I want to contribute the following amount each pay period:

\$50 \$30 \$20 \$10 \$5 \$3

Other \$_____

I have _____ pay periods each year.
(12, 24, 26, 52, etc.)

B DIRECT GIFT

A direct gift of \$_____

Direct gift to be paid by:

- Cash/Check (enclosed)
(make checks payable to United Way of Hardin County)
- Stocks/Securities (please call 419-675-1860)
- Credit Card
 - Monthly
 - Quarterly
 - One time

C BILL/INVOICE ME

Bill me for a gift of \$_____

- Monthly
- Quarterly
- One Time on _____ (Date)

If different from above, please list your billing address:

ADDRESS

CITY ST ZIP

CREDIT CARD NUMBER

EXP. DATE SECURITY CODE

United Way of Hardin County does not sell, trade, or disclose its donors' personal information

Please keep a copy of this pledge to comply with IRS tax requirements.

\$ TOTAL AMOUNT (A + B + C)

Invest my contribution where it's needed most

X SIGN HERE: _____ DATE: _____

THANK YOU!

Scan the code below to donate online now
United Way of Hardin County has earned the
2023 Guidestar Gold Seal of Transparency.
Visit <https://www.guidestar.org/Profile/34-1022412> to view our profile.

OPTIONAL: *If you would like to designate a portion of your contribution, please indicate below*

- \$_____ Education
- \$_____ Health resources
- \$_____ Economic mobility
- \$_____ to a specific agency or United Way program.

List agency or projects here

Learn more about our
Partner Agencies and
United Way programs on
the back of this form.



Call (419) 675-1860 or visit unitedwayhardincounty.org for more information.

Submit completed form to United Way of Hardin County at PO Box 547, Kenton, OH 43326