



CAPITOL CLUB PLEDGE CARD

Mr. Mrs.
 Ms. Dr. _____
NAME EMPLOYER

HOME ADDRESS

CITY STATE ZIP

PHONE: HOME WORK CELL EMAIL

Household Capitol Club gifts may be combined for additional recognition.

NAME OF SPOUSE/PARTNER EMPLOYER

Name as you wish it to be published. I/We wish to remain anonymous.

SIGNATURE DATE

TOTAL PLEDGE

\$

PLEASE CHOOSE A PAYMENT
OPTION FROM BELOW

PAID IN FULL

Cash Check # _____

Credit Card: VISA MASTERCARD DISCOVER
 AMERICAN EXPRESS

Card No. _____ Exp. Date _____

*Home address required for credit card payment;
A receipt will be mailed to you.*

DIRECT BILL

Please bill me. Bills will be sent to your home address listed to the left.

Monthly Quarterly

One-Time _____ (INDICATE MONTH)

STOCKS OR
SECURITIES

For stock transfers, please call (304) 340 - 3507.

PLANNED
GIVING

For planned giving, please call (304) 340 - 3500.

PAYROLL
DEDUCTION

In order to have your pledge deducted from your payroll, please
complete the forms provided at your place of employment.



Please choose how you want to invest in your community.

UNITED WAY COMMUNITY IMPACT FUND (Recommended). I want to make the most powerful contribution possible. Please invest my contribution in the United Way Community Impact Fund to make my community a stronger and safer place to live.

Please direct my contribution to:

Non-profit name and address

Non-profit name and address

This card must be returned to the United Way of Central West Virginia by December 31 in order to honor your designation.

United Way does not provide goods or services as whole or partial consideration for any contributions. Donor does not expect to receive a financial or economic benefit as a result of this contribution. West Virginia residents may obtain a summary of the contribution and financial documents from the Secretary of State, State Capitol, Charleston, WV 25305.

Thank you for investing in our
community through United Way.

Visit our web site at www.unitedwaycww.org to find out how your gift makes a difference.