

Cooke County United Way Campaign _____

PLEDGE/CONTRIBUTIONS

(check one) Mr. Mrs. Miss Ms.

Name: _____

Address: _____

City: _____, Texas _____

Employer: _____

_____ Date: _____

(Your signature)

1) Total Gift/Pledge: \$ _____

(PLEASE DO NOT LEAVE THIS BLANK)

2) Method of payment: (check one)

Cash

Check # _____

Bill Me (\$50 minimum, check one)

One time (Jan)

Quarterly (Jan, Apr, Jul, Oct)

Payroll Deduction (PLEASE FILL OUT
BOTTOM PORTION FOR YOUR PAYROLL DEPT.)

PLEASE FILL OUT BOTH SIDES OF CARD

RETURN TOP PORTION TO COOKE COUNTY UNITED WAY

THIS SECTION FOR YOUR PAYROLL DEPARTMENT

Name: _____

Signature: _____

I authorize my employer to deduct the following amount:
(Please check one)

Fair Share (1 hour's pay per month) Amount \$ _____

Weekly \$ _____

Pay period \$ _____

One time deduction \$ _____

Keep this stub as documentation to the IRS that your gift is fully deductible within the limits of the current law. No compensation, goods/services have been given to the donor in return for their contribution.

Name: _____ Date: _____

Contribution Amount: _____

Thank You!

You may designate your donation to the following areas:

Community Impact – Health

Community Impact – Education

Community Impact – Income Stability

Thank You Options (please check one)

DO NOT ACKNOWLEDGE my gift

Please acknowledge my gift (address MUST be included on card)

CHISHOLM TRAIL CLUB – GIVING LEVELS

Trailblazer \$ 5,000 and up

Scout \$ 2,000 - \$ 4,999

Wagon Master \$ 1,000 - \$1,999

Wagon Driver \$ 500 - \$ 999

Yes, please add me to the monthly email list

Email: _____

Yes, please send me information about the Legacy Giving Program (MUST include address on card)

ONLINE DONATIONS ACCEPTED YEAR ROUND!

Please visit our website

www.cookeuw.org

Payroll Department Info

Detach this stub,

and give to your Payroll Department



IRS Stub

Detach this stub,

and keep for your records.



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