

Pledge to United Way for _____ School

Contributor: _____

PLEASE PRINT (First & Last Name)

Mailing Address _____

Email Address _____

I want to help others in my community by giving through: Payroll Deduction (Check Giving Level)

One time **payroll deduction** of _____ (This is the TOTAL Amount.)

Monthly **deduction** of _____ will begin in January.

One time **contribution** of _____ (Cash or Check)

Check Here if you are giving your **Fair Share** (1 hour's pay each month or 1% of yearly earnings).

Signature: _____ Date: _____



I want to designate part of my gift to a specific United Way partner agency. (\$25 minimum)

Agency Name _____

Thank You!

Chances are, you or someone you know will use the United Way member agency service or program in your lifetime. Perhaps your son will become a Boy Scout or your daughter a Girl Scout. Perhaps it's the Red Cross, Humane Society or you helped a special needs child with Special Olympics. Your Local United Way was started in 1953 and addresses the needs of the people who live and work in Scotland County. Your money stays local, so when you contribute, you are helping your friends and neighbors!

It takes the whole community working together to reach our goals and we need you to get there, so I hope you will consider giving.

BE PART OF THE CHANGE!
GIVE. ADVOCATE. VOLUNTEER.
LIVE UNITED



**United
Way**
OF SCOTLAND COUNTY

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