OUR VISION, AN ORANGE COUNTY WHERE EVERY PERSON RECEIVES A QUALITY EDUCATION, IS FINANCIALLY STABLE, IS HEALTHY AND THRIVING, AND HAS A PLACE TO CALL HOME.

Thank you for your support!
PLEDGE FORM

1. ABOUT YOU (Please Print)
☐ Mr.  ☐ Mrs.  ☐ Ms.  First Name ___________________________ M.I. _____ Last Name ___________________________
Home Address ______________________________________________ City __________________ State _____ ZIP ________________
Mobile Phone ______________________________________________ Home Email __________________________________________________
☐ I’d like to receive the monthly “Doing More” e-newsletter.
Let us know if you have a specific area of interest (We do not rent, trade, or sell our donor list).
☐ Education  ☐ Health  ☐ Housing  ☐ Financial Stability

ACKNOWLEDGMENT
Please list my donation to recognize my gift and to inspire others to give. Use the following acknowledgment:
Individual Names or Family ____________________________________
☐ I wish to remain anonymous. This means my name will not appear on printed materials or Orange County United Way’s website.

EMPLOYER DATA (if applicable)
Employer Name _______________________________________________ Employee ID# ___________________________
Location/Department __________________________________________

2. YOUR GIFT
My gift to Orange County United Way
Together, we improve the lives of adults and children right here in Orange County.
My gift to Orange County United Way will support the fight for the four most critical, interconnected needs in our community—Education, Health, Housing and Financial Stability.

Additional gift (other Nonprofit agency) — $120 minimum per organization
Name of the other agency ________________________________________ city__________________________
For gifts to other nonprofits that qualify as 501(c) (3) tax deductible and Patriot-Act compliant organizations, a processing fee of 9% will be applied. (Exceptions may apply for Leadership and Tocqueville giving levels).
If you checked the box to remain anonymous, your name will not be provided to the designated agencies.

My Total Gift

3. PAYMENT METHOD
Here is my pledge. Please check the appropriate boxes.

☐ EASY PAYROLL DEDUCTION

<table>
<thead>
<tr>
<th>$</th>
<th>X</th>
<th>= $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount per Pay Period</td>
<td>Number of Pay Periods in Full Year</td>
<td>My Total Payroll Deduction Gift</td>
</tr>
</tbody>
</table>

OTHER PAYMENT OPTIONS

☐ Cash (amount enclosed) ________________________________ $ __________
☐ Check # ________________________________ (payable to Orange County United Way) $ __________
☐ Credit Card (amount) ________________________________ $ __________
☐ In Full  ☐ Quarterly  If left blank, the contribution will be charged in full.
Name on Card ____________________________________________
Credit Card # ____________________________________________
Exp. Date ____________________

Signature Required X ____________________________ Date ____________________________

Return the white copy to United Way. The blue copy to your employer. Retain the amber copy for yourself.
Orange County United Way • 18012 Mitchell South, Irvine CA 92614 • 949.660.7600 • UnitedWayOC.org • TAX ID# 33-0047994
Learn about our Privacy Policy at UnitedWayOC.org/Privacy-Policy.