



# UNITED WAY OF LICKING COUNTY 2022 CORPORATE CAMPAIGN PLEDGE



_____ Company Name		_____ Contact		
_____ Mailing Address (Street or PO Box)		_____ City	_____ State	_____ Zip
_____ Email Address		Phone <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell		

- I/we would like more information on leaving a legacy gift to UWLC.
- I/we have named UWLC in my/our will.

**Improving Lives by Uniting the Community!**

PO Box 4490 • Newark, Ohio 43058-4490 • 740.345.6685 • [www.unitedwaylc.org](http://www.unitedwaylc.org)



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# ONE TIME CONTRIBUTION

Cash  Check

\$ \_\_\_\_\_

Amount

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Check Number

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date

Please keep our organization or company anonymous.

# OR BILL ME OR CHARGE MY CREDIT/DEBIT CARD

1  One Time  Monthly  Quarterly Start Date \_\_\_\_\_

2  Bill Me  
 Charge my Credit or Debit Card  Cover 2.59% Processing Fee

3 Billing Address for Card

Same As Other Side \_\_\_\_\_  
 Other \_\_\_\_\_

\_\_\_\_ C V V \_\_\_\_ / \_\_\_\_  
Credit/Debit Card Number Expiration Date

Give Online at [unitedwaylc.org/donate](http://unitedwaylc.org/donate) or Text "PAYATTENTION22" to 919-99

## CORPORATE GIVING LEVELS

Capstone \$100,000 +	Builder \$1,000 - \$4,999
Pillar \$25,000 - \$99,999	Investor \$250 - \$999
Cornerstone \$10,000 - \$24,999	
Foundation \$5,000 - \$9,999	

OPTIONAL: Please direct this gift to support a specific priority:  
(minimum \$50 donation required to process)

Behavioral Health \$ \_\_\_\_\_  
Promoting healthy communities that effectively address addiction, child abuse and neglect, domestic violence, and mental health.

Children, Youth & Families \$ \_\_\_\_\_  
Increasing opportunity for children, youth and families to thrive.

Poverty \$ \_\_\_\_\_  
Coordinating and enhancing services that promote self-sufficiency.

SIGNATURE (required to process pledge)

X

TOTAL GIFT \$

# ONE TIME CONTRIBUTION

Cash  Check

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Amount

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Check Number

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