

## 2025 Campaign

## MAKE A PLEDGE. MAKE A DIFFERENCE.

Contact Info	ormation
Name	
	City, State Zip
	Email
Employer	
Donation In	formation
	My Total Pledge
Payroll De	eduction: I authorize my employer to deduct \$\infty\$5 \$\infty\$10 \$\infty\$
Payroll De	eduction: I authorize my employer to deduct a <i>fair share</i> (one day's pay) in the amount of \$
☐ Direct Cor	ntribution: Paid in Full (payable to United Way of Orange County)checkcash
☐ Direct Cor	ntribution: Bill Me  Once  Monthly  Quarterly
☐ Direct Cor	ntribution: Charge my credit card; circle one - Visa / MasterCard / AmEx / Disc
Card Num	ber Exp Date
CVC Code	Billing Zip
Engagemen	t Information (check all that apply)
☐ I would lik	ke to sign up for the email newsletter.   I would like to receive emails about volunteer opportunities.
☐ I apprecia	ite recognition of my contribution.
	Follow us on social media: F @ W @uwoctx #uwoctx
Authorization	on
Signature	Date

## We appreciate your support!

Keep a copy for your tax records. Consult your tax advisor for more information.

No goods or services were provided in exchange for this contribution.

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