

UNITED WAY OF SAN JOAQUIN COUNTY PLEDGE FORM

WHO I AM

(Please print legibly)

First Name _____ MI _____ Last Name _____

Birth Month _____ Birth Date _____

Email _____ Phone Number _____

Donor Address _____

City _____ State _____ Zip _____

Employer _____

Department _____

Signature _____ Date _____

Your donation will be automatically deducted from your paycheck by your employer according to your instructions and will be sent to United Way of San Joaquin County.

GIVE
LOCAL,
IMPACT
LOCAL.



MY DONATION

(Via payroll deduction)

☐ **New Contributor**

This is my first gift to United Way of San Joaquin County

☐ **Rollover**

Please continue my current pledge

Other Methods of Giving

☐ Cash ☐ Check ☐ Credit Card

How Much Would You Like To Donate Per Pay Period?

\$ _____ per pay period

x _____ pay periods

= _____ annual donation

Want to make your donation with a credit card?

Scan the QR code below to make your donation online!



SCAN
ME!

MY IMPACT

Please select where you would like your contribution to go to:

Maximize your impact by donating to a San Joaquin County nonprofit, where every dollar stays in our community.

☐ **United Way of San Joaquin County**

Donations will be directed to the most critical issues in San Joaquin County such as Education, Homelessness, and Economic Mobility.

☐ **Preferred Nonprofit Partner Agency Name, Address, City, Zipcode**

*If you choose to designate your gift to a non partner agency but contribute less than \$100 annually, United Way will redirect those funds to our general fund. *A non partner agency is any nonprofit not listed on our preferred partner list.



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