# Workplace Campaign Pledge Form

## How You Can Help

### Option A

- **Restricted Contribution**
  - AMOUNT $________

### Option B

- **Education**
  - Helping children and youth achieve their potential
  - AMOUNT $________

- **Income**
  - Helping families become financially stable and independent
  - AMOUNT $________

- **Health**
  - Improving people’s health and overall wellness
  - AMOUNT $________

- **Food Insecurity**
  - Alleviating hunger for struggling families
  - AMOUNT $________

### Option C

- **Influence the Condition of All.** United Way Community Impact Fund. We value your contribution, and will apply it to the impact area where it is currently needed most.
  - AMOUNT $________

---

**Signature**

Please check the accuracy of all your entries.

Thank you for your contribution through the United Way campaign. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2 or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.

---

United Way of Greater Mercer County is a 501 c 3 organization, with a federal tax identification number - 21-0683073. United Way will keep your information confidential and will not give or sell your information to any third party.