

SALINA AREA UNITED WAY

CAMPAIGN PLEDGE FORM

PERSONAL INFORMATION

Mr./Mrs./Ms First Name M.I. Last Name

Employer Work Phone

Home Address Cell/Home Phone

City, State, Zip

E-Mail Check to receive a monthly e-newsletter containing volunteer, community, and campaign information

CHECK ONE PAYMENT METHOD (This pledge will remain in effect until changed by me.)

PAYROLL DEDUCTION

OPTION A: Per Pay Period

\$25 \$20 \$15 \$7.85

X

_____ (pay periods per year)

=

\$ _____
Total Gift Amount

My gift is 1% or more of my salary

OPTION B: Direct Gift

Cash or check _____
Enclose check payable to:
Salina Area United Way

Online at www.unitedwaysalina.org
(click 'GIVE' on home page)

Text to Give: TEXT 2022CAMPAIGN to 41444

DIAMOND DONOR
(Check if you have been a United Way donor for 25 years or more!)

Signature: _____
(must have signature to process)

Date: _____

SALINA AREA UNITED WAY

BUILDING BRIDGES

Grow from yesterday. Give for today. Guarantee tomorrow.



United
Way

Salina Area United Way



CONTACT US:
Salina Area United Way
113 N 7th St., Suite 201
Salina, Kansas 67401
(785) 827-1312

SALINA AREA UNITED WAY

FUNDING PARTNERS 2022



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