

Thank You for LIVING UNITED

“Be the change you wish to see in the world.”  
~Mahatma Gandhi



United Way of  
Greater Union County  
33 West Grand Street  
Elizabeth, NJ 07202  
[www.uwguc.org](http://www.uwguc.org)  
P. 908.353.7171

CONGRATULATIONS!

As you embark on  
your new journey,  
we invite you to  
**LIVE UNITED!**

**GIVE. ADVOCATE. VOLUNTEER.**  
**LIVE UNITED**™  
[www.uwguc.org](http://www.uwguc.org)



United Way of  
Greater Union County

# YOUR BEST YEARS. YOU EARNED IT. MAKE THEM GOLDEN.

## Congratulations on your retirement!

Over the years, you and your co-workers have improved the lives of thousands of people in our local community through hard work and generous giving. Now that you are becoming a retiree, United Way offers several options for you to continue your financial support.

In addition to your financial support, you may also be interested in volunteering. By sharing your skills and experiences, you can help make a difference here in Greater Union County.

We invite you to continue investing in your community. Please complete the enclosed pledge form and return it to the United Way of Greater Union County.



# New Retiree Pledge Form

~Please Print Neatly~

Please mail this form to: **United Way of Greater Union County**  
33 West Grand Street, Elizabeth, NJ 07202

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

(work/home/cell)

E-mail Address (work/home) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Billed Gift (\$50 minimum)**

- Annually       Quarterly  
 Semi-annually       Monthly

**Total: \$** \_\_\_\_\_

**Start Date:** \_\_\_\_\_  
(will begin January 1st unless indicated)

**Cash / Check**

- Cash       Check (payable to United Way of Greater Union County)

check # \_\_\_\_\_ check date \_\_\_\_\_

(your check may be processed as an electronic debit from your account)

**Total: \$** \_\_\_\_\_

**Credit Card**

(Deductions will begin January 1st unless indicated)

**Gift amount:**

- \$20  
 \$15  
 \$10  
 \$5  
 \$ \_\_\_\_\_

**To be deducted:**

- 1st of every month  
 15th of every month  
 1st and 15th of every month  
 one time

**Total: \$** \_\_\_\_\_

**Credit Card Information:**

- Visa       Mastercard       American Express

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder \_\_\_\_\_