

United Way of Wise County

Attn: Executive Director
P.O. Box 213
Decatur, TX 76234



Tel/Fax 940.627.3684
uwwise.ed@embarqmail.com
www.wisecountyunitedway.org

LIVE UNITED™

Pledge Form, 2021 – 2022 CAMPAIGN to Advance the Common Good

TO: Payroll Department
Decatur ISD (Go, Eagles!!)

FROM: Employee Name _____
Employee ID _____ (if applicable)

ABSOLUTELY! You can count on me! I Choose to “LIVE UNITED”!
Here’s my pledge to help our youth, our elderly and our neighbors in need.

TOTAL ANNUAL PLEDGE: _____

Option 1 – Payroll Deduction, \$\$ per pay period:

Please deduct \$_____ from my regular paycheck
Beginning with the pay period _____
(Note: this deduction will continue while you are an employee until you request a change.)

Option 2 – One-time Payment:

Please forward attached check for \$_____ to United Way of Wise
County. (Check should be made out to “United Way of Wise County”.)

Standard designation: The United Way of Wise County Community Fund.
Optional designation: Please designate my contribution to _____.

Signature: _____

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United Way of Wise County

Attn: Executive Director
P.O. Box 213
Decatur, TX 76234



Tel/Fax 940.627.3684
uwwise.ed@embarqmail.com
www.wisecountyunitedway.org

LIVE UNITED™

Pledge Form, 2021 – 2022 CAMPAIGN to Advance the Common Good

TO: Payroll Department
Decatur ISD (Go, Eagles!!)

FROM: Employee Name _____
Employee ID _____ (if applicable)

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Tel/Fax 940.627.3684
uwwise.ed@embarqmail.com
www.wisecountyunitedway.org

LIVE UNITED™

Pledge Form, 2021 – 2022 CAMPAIGN to Advance the Common Good

TO: Payroll Department
Decatur ISD (Go, Eagles!!)

FROM: Employee Name _____
Employee ID _____ (if applicable)

ABSOLUTELY! You can count on me! I Choose to “LIVE UNITED”!
Here’s my pledge to help our youth, our elderly and our neighbors in need.

TOTAL ANNUAL PLEDGE: _____

Option 1 – Payroll Deduction, \$\$ per pay period:

Please deduct \$_____ from my regular paycheck
Beginning with the pay period _____
(Note: this deduction will continue while you are an employee until you request a change.)

Option 2 – One-time Payment:

Please forward attached check for \$_____ to United Way of Wise
County. (Check should be made out to “United Way of Wise County”.)

Standard designation: The United Way of Wise County Community Fund.
Optional designation: Please designate my contribution to _____.

Signature: _____

Thank you! Your contribution is very important to your community. Please return
completed form as soon as you can to your Payroll Department.

United Way of Wise County

Attn: Executive Director
P.O. Box 213
Decatur, TX 76234



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