

NAME:

ADDRESS:

SIGNATURE: _____

DATE: _____

INDIVIDUAL PLEDGE *THANK YOU!*



United Way Services, Inc.
215 West 6th Street
Dubuque, IA 52001-6809

TOTAL PLEDGE

PAID NOW

BALANCE DUE

\$ _____

\$ _____

\$ _____

Bill Me: Amount \$ _____
Remit White Copy

Monthly

Quarterly

Once on _____

NAME:

ADDRESS:

SIGNATURE: _____

DATE: _____

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