



United Way of Lowndes & Noxubee

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P. O. Box 266
223 22nd St No
Columbus, MS 39703
662-370-1922

By submitting this form, you authorize your payroll department to deduct the stated amount from your paycheck on the schedule determined by your employer. This deduction can be cancelled at any time by contacting your payroll department. Your gift is tax-deductible.

CONTRIBUTION OPTIONS

PAYROLL DEDUCTION

Fair Share (1 hour's pay) Total \$

Other \$ Per Pay Period Total \$

OTHER GIVING OPTIONS:

Please accept my one-time gift of \$

Please bill me a quarterly pledge of \$

Electronic Give Option:

Set up an online payment through check/Savings/Credit Card

Click HERE

I want my gift to go to a specific 501(c)3 agency or another United Way.

Agency Name:

Designated Amount:

\$1 a week will provide groceries for a family in need * \$2 a week will provide after school tutoring for children \$5 a week will provide 52 meals for a senior citizen * \$10 a week will provide a Safe place for a battered spouse

CONTRIBUTOR INFORMATION

(date)

Name

Company/Organization

Address

City

State

Zip

Phone/Cell

Email Address

Yes, I would like to be a RIVERINE Donor:

Pilot (\$500 - \$749)

Captain (\$750 - \$999)

Commodore (\$1,000 - \$1,499)

Admiral (\$1,500 - \$2,999)

Grand Giver (\$3,000 and above)

I want this gift to remain anonymous!