



Local Union Community Charities Pledge Form
1211 Wiley Blvd. SW
Cedar Rapids, IA 52404

Step 1 Donor Information

Name (first, middle, last): _____

Address: _____

Billing Address: _____

City, State, Zip: _____

Phone: _____

Company name: _____

E-mail: _____

I would like more information about volunteering in our community.

Step 2 My Gift to Our Community

Please choose one of the following

Easy Payroll Deduction(if permitted)

\$ _____ per pay period X # _____ pay periods= _____ Total

One-Time Gift

\$ _____ Total Gift

Recurring Gift

\$ _____ Total Annual Gift

Please deduct my gift: Monthly Quarterly Semi-Annually

For either One-Time or Recurring Gift, please fill out the following:

Cash/Check Enclosed

ACH/Debit(See attached Authorization Form)

Check # _____

Check Date: _____

I hereby authorize Local Union Community Charities to initiate this recurring transaction the first month after my information is received. This recurrence will continue until paid in full.

Signature _____ Date _____

I am a Union member

I would like my donation to be anonymous

Union Name: _____

Local #: _____

* Please designate ___ % of my donation to this 501(C)(3):

Org Name: _____

Address: _____

