

I GIVE WHERE I LIVE

WrightCountyAreaUnitedWay.org

WRIGHT AREA COUNTY UNITED WAY

PO BOX 243, MONTICELLO MN 55362

763-688-1919

WCAUWOffice@gmail.com

PERSONAL INFORMATION		BEASY PAYROLL DEDUCTION \$		☐ Please email receipt☐ No receipt necessary
First Name MI Las	t Name	A. I want to contribute \$ x pay periods B. My pay period isWeekly (52/yr)Every 2 weeks (26/yr) Other: pay periods	Bi-monthly (24/yr)	
Home Street Address		C. My total annual payroll deduction is (A x B) = \$_		
		☐ DIRECT GIFT:		
City State Zip		O CASH OR CHECK O BILL ME: Annually Quarterly		
Preferred email	Preferred Phone	O CREDIT CARD: Online at WrightCountyAreaUnitedWay.org or call 763-688-1919. O ONLINE BILL PAY: I will set up through my bank or other online service United Way will receive \$ every (week, two weeks, month, quarter)		rvice
Employer (if applicable)		O STOCK AND SECURITIES: Please of	call United Way to make a	rrangements