

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email (Optional) \_\_\_\_\_

Investing in  
 your community



what matters.™

## UNITED WAY INDIVIDUAL GIFT CARD

In support of human services provided through  
 the United Way

I would like to make a gift of \$ \_\_\_\_\_  
 of which \$ \_\_\_\_\_ is paid now.

Please make checks payable to  
 "United Way of Greater Lorain County"

The balance of \$ \_\_\_\_\_ is to be billed:

Monthly  Quarterly  Semi-Annually  Other \_\_\_\_\_

Or, please charge my gift of \$ \_\_\_\_\_ to my:



(please circle one)

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Sign Here to  
 Authorize Your Pledge

	Date
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**Thank You!**

United Way of Greater Lorain County • 1875 North Ridge Road, East • Suite H • Phone 440-277-6530/324-2898 • Fax 440-277-7409 • Lorain, Ohio 44055  
 Please include United Way in your will, and notify us when you do.