



**Fort Wayne  
Urban League**

*Through your gift to the Fort Wayne Urban League, you show your support for eliminating social & economic disparities in urban communities.*

**Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Check:** Enclosed is my first payment of \$ \_\_\_\_\_. The remaining payments will be on: \_\_\_\_\_.

**Credit Card:** Charge my card with a payment of \$ \_\_\_\_\_ on the following date(s): \_\_\_\_\_.

Master Card  Visa  American Express

Account # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Please charge my first payment of \$ \_\_\_\_\_

Please charge my credit card:  Monthly  Quarterly  Annually

**United Way:** My gift will be through the United Way donor option and will post in January.

**Matching Gift:** My company/ organization will match my charitable contribution. Double my dollars!

**Stocks:** I choose to pay my gift with gifts of stock. Broker: \_\_\_\_\_ Transfer date: \_\_\_\_\_

**Optional:** This gift is given in  Memory of  Honor of

Name of person to be commemorated: \_\_\_\_\_  
(Please print clearly)

## My Three Year Commitment to the Movement...

**Yes! I would like to make a contribution in support of the *Annual Fund* and partner with the FWUL in its mission to empower communities and change lives.**

**FY'19 Pledge**

**FY'20 Pledge**

**FY'21 Pledge**

**Total Amount Pledged**

**Amount Enclosed**

**Balance to be Paid**

**Please make checks payable to:**  
Fort Wayne Urban League, Inc.

ATTN: Membership  
Fort Wayne Urban League  
2135 S. Hanna Street  
Fort Wayne, IN 46803  
260.745.3100