



United We Care Fund

Pledge Card Change Form

- I understand that all donations to the Fund become the property of the United We Care Fund, and that if I wish to change or discontinue my contribution, I must complete a new pledge card.
- I wish to make the following change to my contribution

Stop the contribution _____

Change the contribution to _____

Team Member printed name: _____

Team Member #: _____

Store Number: _____

I authorize this change.

Team Member Signature: _____ Date: _____

You may return this form to your store management or the United Supermarkets payroll office.