

# BE THE DIFFERENCE.

GIVE. ADVOCATE. VOLUNTEER.

Unless otherwise selected, your gift is automatically designated to your local United Way.  
United Way of Becker County



## MY INFORMATION

MR/MRS/MS/DR FIRST NAME MI LAST NAME

HOME ADDRESS (For credit card charges, address must be billing address.) CITY/STATE/ZIP

HOME PHONE or CELL PHONE (Circle One) WORK PHONE EMPLOYEE ID (if applicable)

PREFERRED EMAIL ADDRESS  I AM RETIRING IN THE NEAR FUTURE ANTICIPATED DATE OF RETIREMENT

*United Way adheres to a donor privacy policy to keep your personal information confidential.*

### A PAYROLL DEDUCTION

### -OR- B NON-PAYROLL DEDUCTION

#### 1 PLEDGE AMOUNT PER PAY PERIOD

\$50  \$25  \$10  \$5 Other \$\_\_\_\_\_

- OR -

increase my current gift by:

\$1  \$3  \$5  \$10  Same as Last Year

#### 2 PAY PERIODS

#\_\_\_\_\_ pay periods each year. (12, 24, 26, 52, etc.)

#### 3 TOTAL YEARLY PLEDGE

Multiply amount per pay times number of pay periods

\$\_\_\_\_\_ x \_\_\_\_\_ = \$\_\_\_\_\_

Per Pay Pay Periods Total Annual Pledge

#### ONE TIME GIVING

\$\_\_\_\_\_ Total Gift

Cash (enclosed)  Check (enclosed)

Credit Card: Card#\_\_\_\_\_ Exp: Mo\_\_\_\_/ Yr\_\_\_\_

Visa  MC  Discover CVC 3 digit code \_\_\_\_\_

#### BILL ME

One Time - One time annual pledge of \$\_\_\_\_\_ (\$100 minimum)

Monthly - Monthly pledge of \$\_\_\_\_\_ (\$25 minimum) for a total annual pledge of \$\_\_\_\_\_

> I want to receive my bill:  Immediately  Jan. 1  Other\_\_\_\_\_

#### SUSTAINED GIVING

You can make ongoing monthly gifts automatically and securely from your bank account or credit card.

### C RECOGNITION OPTIONS

### - & - D SIGNATURE

## THANK YOU!

Combined Giving

Recognize my gift with my spouse/partner. List their name & workplace below.

\_\_\_\_\_

I wish to remain anonymous.

X

Donor Signature

Date

Thank you for your contribution to United Way. No goods or services were provided in exchange for this contribution.

## Thank you for your investment in your community.

100% of your investment in United Way supports local services addressing Basic Needs, Education, Financial Stability and Health. A gift to United Way is the most effective way to help your whole community.

OPTIONAL - IF NOT COMPLETED, 100% OF YOUR GIFT WILL BENEFIT YOUR LOCAL UNITED WAY.

Designations to any Partner Program

United Way processes donor-directed contributions as a service to our donors.

Amount from Total Gift Above

\_\_\_\_\_ % or \$ \_\_\_\_\_  
Organization Name

\_\_\_\_\_ % or \$ \_\_\_\_\_  
Organization Name

PLEASE CHECK THE ACCURACY OF ALL YOUR ENTRIES.