

## MY INFORMATION

MR/MRS/MS/MX/DR FIRST NAME MI LAST NAME JR/SR DOB (MM / DD / YY)

HOME ADDRESS CITY STATE ZIP

PHONE: HOME WORK MOBILE EMAIL: HOME WORK

FOR RECOGNITION PURPOSES LIST MY/OUR NAME AS

YES, I'M IN A UNION.

- I am a first time donor to United Way
- I am a loyal donor (10+ years), giving since \_\_\_\_\_.
- Contact me about United Way's Planned Giving Program
- I wish to remain anonymous

## MY GIFT TO MY COMMUNITY - Please choose A, B, or C below.

**LEADERSHIP GIVING LEVELS** *Tocqueville Society* \$10,000+ *Emerald* \$7,500+ *Platinum* \$5,000+ *Gold* \$3,000+ *Silver* \$2,000+ *Bronze* \$1,000+

Gifts of \$156 or more annually qualify you to be part of the Donor Appreciation Rewards Program, entitling you to deals at area cultural institutions. Gifts of \$250 or more annually qualify you to join one or all of our Affinity Groups.

**A**  **EASY PAYROLL DEDUCTION**

A total annual gift of \$ \_\_\_\_\_

I want to contribute the following amount each pay period:

\$50  \$20  \$10  \$6  \$3

Other \$ \_\_\_\_\_

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

**B**  **DIRECT GIFT**

A direct gift of \$ \_\_\_\_\_

Direct gift to be paid by:

Cash/Check (enclosed)  
Made payable to United Way of Greater Toledo

Stocks/Securities call 419-254-4667

Credit Card *Please include your information below.*

Monthly (Begins Jan.)

Quarterly (Begins Mar.)

One time on \_\_\_\_\_ (DATE)

**C**  **BILL/INVOICE ME**

Bill me for a gift of \$ \_\_\_\_\_

Monthly (Begins Jan.)

Quarterly (Begins Mar.)

One time on \_\_\_\_\_ (DATE)

If different than above, please list your billing address:

ADDRESS

CITY ST ZIP

CREDIT CARD NUMBER

EXP. DATE SECURITY CODE

\$  **TOTAL AMOUNT**  
(A+B+C)

Invest my contribution to the Community Fund.  
(Benefiting Lucas, Wood and Ottawa Counties to do the most good in Education, Financial Stability, Health and Housing.)

**X SIGN HERE:** \_\_\_\_\_ Date: \_\_\_\_\_

## THANK YOU!

**OPTIONAL:** If you would like to designate a portion of your contribution, please indicate below.

\$ \_\_\_\_\_ **EDUCATION:** *Increasing school readiness and ensuring student success.*

\$ \_\_\_\_\_ **FINANCIAL STABILITY:** *Linking residents to basic needs services and improving financial stability.*

\$ \_\_\_\_\_ **HEALTH:** *Promoting access to healthcare and healthy lifestyles.*

\$ \_\_\_\_\_ **HOUSING:** *Ensuring individuals have access to safe, stable and affordable housing.*

\$ \_\_\_\_\_ \_\_\_\_\_ CITY/STATE

AGENCY NAME\*

\$ \_\_\_\_\_ \_\_\_\_\_ CITY/STATE

AGENCY NAME\*

Please do not release my name and address to the nonprofit listed above.

\*Agency eligible to receive tax deductible donations and compliant with the Patriot Act.

**AFFINITY GROUPS:** United Way Affinity Groups mobilize philanthropic volunteers to impact our community. By donating \$250 or more, you can join one, or all, today!

- African American Leadership Council of United Way
- United Way Emerging Leaders
- Women's Initiative of United Way
- Continue United, kick start the next chapter of your life and join other soon-to-be retired and retired community members to create greater impact

Learn more by visiting the "Get Involved" page at [unitedwaytoledo.org](http://unitedwaytoledo.org)

Questions? Call 419-254-4667  
[unitedwaytoledo.org](http://unitedwaytoledo.org)

- United Way of Greater Toledo does not sell, trade, or disclose its donors' personal information.
- 15% of donations will be used to support fundraising and administrative costs.
- Please keep a copy of this pledge form to comply with IRS tax requirements.