

Loyal Contributor

Yes, I have been donating to United Way for 10+ years.

GIVE. ADVOCATE. VOLUNTEER.
LIVE UNITED®
UNITED WAY PLEDGE FORM



United Way of Greater New Haven
900 Chapel Street - 10th Fl
New Haven, CT 06510
(203) 691-4231
www.uwgnh.org

MR/MRS/MS/DR FIRST NAME LAST NAME

HOME ADDRESS (For credit card charges, address listed must be your billing address.) CITY

STATE ZIP (AREA CODE) PREFERRED PHONE NUMBER

EMAIL ADDRESS

COMPANY NAME EMPLOYEE I.D.

I WANT TO GIVE THE EASY WAY THROUGH PAYROLL GIVING:

- A. I am paid: Weekly (52) Bi-Weekly (26) Twice Monthly (24) Monthly (12) Other _____
- B. Each pay period I will donate: \$50 \$20 \$10 \$5 Other \$____
- C. For a total annual pledge of \$ _____ (Multiply AxB=C)

I PREFER TO MAKE A DIRECT GIFT IN THE AMOUNT OF \$ _____

- Credit Card One time \$_____ Monthly \$_____ VISA MasterCard Discover AMEX
- card number exp. date cvv no.

Securities (please call 203-691-4219 when you are ready to transfer funds)

MY TOTAL GIFT OF \$1,000 OR MORE QUALIFIES ME FOR RECOGNITION IN THE LEADERSHIP CIRCLE.

Please list my/our name(s) as: _____ I prefer to remain anonymous.

Signature (required)

Date

PLEASE CHOOSE HOW YOU WOULD LIKE TO INVEST IN YOUR COMMUNITY:

	AMOUNT
<input type="checkbox"/> UNITED WAY COMMUNITY FUND The easiest and most powerful way to invest in your community	\$ _____
<input type="checkbox"/> EDUCATION Helping children and youth achieve their potential through education	\$ _____
<input type="checkbox"/> BOOST! Gives New Haven public school students the academic supports, health and social services they need for school success	\$ _____
<input type="checkbox"/> SUCCESS BY 6® Provides access to high quality early care and education for children from low-income families	\$ _____
<input type="checkbox"/> EXPERIENCE CORPS Puts the wisdom of older adults to work as volunteer literacy tutors through a partnership with Agency on Aging of South Central CT	\$ _____
<input type="checkbox"/> INCOME Helping families become financially stable	\$ _____
<input type="checkbox"/> SAM (Smart About Money) Matches volunteer financial coaches with households who want help reaching their financial goals	\$ _____
<input type="checkbox"/> HEALTH Helping people become healthy and active	\$ _____
<input type="checkbox"/> OPTIONAL CHOICE You may also choose to make a contribution to a qualified 501(c)3 organization. (A minimum annual donation of \$100 is required per agency)	\$ _____

AGENCY NAME AND ADDRESS

\$ _____
TOTAL ANNUAL GIFT

THIS FORM, ALONG WITH YOUR CANCELLED CHECK OR PAYROLL STUB, WILL SATISFY THE INTERNAL REVENUE SERVICE REGULATIONS REGARDING CHARITABLE GIFTS. NO GOODS OR SERVICES AS WHOLE OR PARTIAL CONSIDERATION ARE PROVIDED FOR ANY CONTRIBUTIONS MADE TO UNITED WAY.

THANK YOU!

WHITE COPY - UNITED WAY YELLOW COPY - EMPLOYER PINK COPY - DONOR/TAX RECORD

THANK YOU!
2011 Pledge Form