BE THE ONE. EVERYONE CAN MAKE A DIFFERENCE. Unless otherwise selected, your gift is automatically designated to your local United Way. GIVE. ADVOCATE. VOLUNTEER.



My Information				
MR/MRS/MS/DR FIRST NAME	MI	LAST NAME	DATE OF BIRTH	
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 United Way adheres to a donor priva	cy policy to	_ I AM RETIRING IN THE NEA	AR FUTURE ANTICIPATED DATE OF RETIREMENT	
A PAYROLL DEDUCTION	-OR-	B NON-PAYROLL DEDUC		
1 PLEDGE AMOUNT PER PAY PERIOD		ONE TIME GIVING		
 ○ \$50 ○ \$25 ○ \$10 ○ \$5 Other \$ - OR - increase my current gift by: ○ \$1 ○ \$3 ○ \$5 ○ \$10 ○ Same as Last Year 			k <i>(enclosed)</i> Exp: Mo/ Yr]Discover CVC 3 digit code	
2 PAY PERIODS		BILL ME		
 # 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 		O Monthly - Monthly pledge of \$ annual pledge of \$ > I want to receive my bill: O In SUSTAINED GIVING You can make ongoing monthly	bledge of \$(\$100 minimum) \$(\$25 minimum) for a total \$ nmediately OJan. 1 OOther r gifts automatically and securely from d. To sign up, please call 217-726-7000 .	
C RECOGNITION OPTIONS	- & -	D SIGNATURE	THANK YOU!	
Combined Giving Recognize my gift with my spouse/partner. List their name & workplace below.		X Donor Signature		
Date Thank you for your contribution to United Way. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2 or other employer documents showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information. A copy of United Way of Central Illinois' most recent IRS Form 900 & audited financials are available online at www.springfieldunitedway.org.				
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.				

Upliving Dulloi-Directed Girls (any 501(c)3 organization)

United Way processes donor-directed contributions as a service to our donors. United Way is unable to guarantee how funds will be used or ensure measurable results by the recipient agency. If less than 100 percent of your total gift above is selected the balance will be invested in United Way programs.

	Amount from Total Gift Above		
	% or \$		
Organization Name			
	% or \$		
Organization Name			