

United Way of Johnson & Washington Counties Pledge Form



MY INFORMATION

Mr. Mrs. Ms. Mx. Dr. _____
 First Name Middle Initial Last Name Employer

Home Address-Street City State Zip

Phone cell home **Personal Email for Thank You & Receipt**

- I want my gift to remain anonymous in all recognition materials.
- Combine my gift with my spouse/partner:

- I am retired or retiring this year & would like to be involved! Contact me!
- I am a loyal donor who has contributed for 25 years +

Mr. Mrs. Ms. Mx. Dr. _____
 First Name Middle Initial Last Name Employer

MY COMMUNITY INVESTMENT

Easy Payroll Deduction \$5 \$10 \$15 \$25 \$50 \$100
 My contribution per pay period: Other Amount: \$_____ I am paid: Weekly (52) Bi-Weekly (26) Semi-Monthly (24) Monthly (12) Other _____
Total Gift: \$ _____

Enclosed/Online Gift Cash/Check, Attached Please make checks payable to United Way of Johnson & Washington Counties Donation of Stock Please contact United Way at: **319.338.7823**
 Online Credit Card-To protect your credit card information, please donate at: **www.UnitedWayJWC.org** **Total Gift: \$** _____

Personal Billing Quarterly Existing Bank Account Debit For new account debit call the United Way at: **319.338.7823**
 One-time Continue monthly debits at: Amount: \$_____ **Total Gift: \$** _____
 Start Date: ____ / ____ / ____ January - December

Create Your Legacy I would like additional information about :
 Investing in United Way's Innovation & Sustainability Fund for purposes such as critical needs, community disasters, agency emergencies and the future growth of United Way.
 Growing United Way's Endowment Fund, or creating a Named Family Fund, held at the Community Foundation of Johnson County, to sustain United Way's work for the next generation.
 Other planned giving options such as: memorials, wills and bequests.

Your gift will be directed to United Way of Johnson & Washington Counties, unless otherwise specified.

MY IMPACT (OPTIONAL)

Improve Lives with United Way
 Make the greatest impact in our community

Birth Through Adult Education

Building Financial Stability

Access to Healthcare

A United Way partner agency or tax exempt 501c3 organization.
 Please direct \$_____ To:
 Name of Organization: _____
 Address: _____
 Min. \$50/year :Donations which do not make the minimum requirement will be directed to UWJWC.

Leadership Giving
 Extend My Reach:
Leadership Circle
 Bronze: \$1,000+ (\$20/wk)
 Silver: \$2,500+ (\$50/wk)
 Gold: \$5,000+ (\$100/wk)
 Platinum: \$7,500+ (\$145/wk)

Tocqueville Society
 \$10,000 and above

My Signature _____ **Date** ____ / ____ / ____

THANK YOU FOR YOUR SUPPORT

United Way of Johnson & Washington Counties • 1150 5th Street, Suite 290 • Coralville, IA 52241
 319-338-7823 • www.UnitedWayJWC.org • Facebook @United Way of Johnson & Washington Counties

No goods or services were given in return for this contribution. United Way respects your privacy. We do not rent, trade or sell donor lists. The entire contribution is tax deductible as allowed by law. Please keep a copy of this pledge form and your year-end pay stub for payroll deduction gifts or cancelled check for gifts under \$250. Tax receipts for payments of \$250 or more will be sent by Jan. 31.