### 17 INFORMATION

# NY COMMUNITY INV

## MY IMPACT (OPTIONAL

### **United Way of Johnson & Washington Counties Pledge Form**



Mx.	First Name	Middle Initial Last Name			Employer	
Dr.	Home Address-Stree		City	State	Zip	☐ I am retired or retiring this year & would like to
Mr. Mrs. Ms. Mx.	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:					be involved! Contact me  I am a loyal donor who has contributed for 25 years +
	First Name  Sy Payroll Deduction  y contribution per pay pe	□ \$25 □	Last Na \$10 ☐ \$15 \$50 ☐ \$100 punt: \$	I am paid: ☐ We	Employer eekly (52)	eekly (26) Semi-Monthly (24)
Enc	losed/Online Gift	to United Way o	k, Attached Please of Johnson & Washing it Card-To protect yease donate at: www.	your credit card		of Stock ct United Way at: <b>319.338.7823</b>
Per	sonal Billing Sta	□ Quarterly □ One-time art Date: / /		Existing Bank Acc Continue monthly Amount: \$	/ debits at:	For new account debit call the United Way at: 319.338.7823
Crea	☐ Investing				uch as critical needs,	community disasters, agency
(	Growing County, t	_	work for the next ger	neration.	d, held at the Commu	nity Foundation of Johnson
Im	☐ Growing County, t ☐ Other pla	United Way's Endowme o sustain United Way's	work for the next ger uch as: memorials, v unson & Washington (	neration. wills and bequests.		Leadership Giving Extend My Reach: Leadership Circle Bronze: \$1,000+ (\$20/wk) Silver: \$2,500+ (\$50/wk) Gold: \$5,000+ (\$100/wk)

#### THANK YOU FOR YOUR SUPPORT

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