

2015/2016 CAMPAIGN PLEDGE FORM



United Way of Greater
Richmond & Petersburg

▶ Step 1 - My Information

MR./MRS./MS FIRST NAME

MI LAST NAME EMPLOYEE ID#

HOME ADDRESS Check if this is a new address APT. #

CITY STATE ZIP

HOME PHONE BUSINESS PHONE (DIRECT LINE)

CURRENT EMPLOYER preferred

HOME EMAIL ADDRESS preferred

BUSINESS EMAIL ADDRESS preferred

Please consider joining a United Way Leadership Society with a gift of \$1,000 or more.

Tocqueville Society (\$10,000+) • Virginians Society (\$5,000—\$9,999) • Capital Society (\$1,000—\$4,999)

We'd like to recognize you in our publications.
Please tell us how you'd like your name to appear:

I wish to remain anonymous in United Way recognition publications.

Are you a 10+ year United Way donor?

We want to honor you through our Loyal Contributors Program.
What year did you first start giving? _____

▶ Step 2 - My Investment In Our Community

OR

Easy Payroll Deduction

Number of pay periods: _____

Amount per pay period:

\$100 \$50 \$25 \$10 Other \$ _____

Other Payment Options

Personal Check — Attached and payable to United Way

Bill Me — To pay later by credit card, transfer of stock/securities or personal check. Must total \$50 or more and your home address is required. Billing preference:

Monthly Quarterly Once M M / Y Y

▶ Step 3 - My Investment Options (See Back For More Details)

Option A: Community Impact Fund (Makes The Biggest Impact)

A contribution to the United Way Community Impact Fund supports **all our work** in the focus areas of **Education, Income, and Health** to address short-term individual needs while working toward long-term community solutions.

AND/OR

Option B: Focus Areas

Designations less than \$50 will be directed to the Community Impact Fund.

EDUCATION (Helping children and youth succeed in school, work, and life)

INCOME (Helping families and individuals achieve financial stability)

HEALTH (Helping individuals achieve and maintain health and wellness across their lifespan)

Option C: Agency Designation

Designations less than \$50 will be directed to the Community Impact Fund.

Designation Name, Address

I wish to remain anonymous to the designated agency.

ANNUAL DESIGNATION

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

TOTAL ANNUAL GIFT

\$ _____

Total here should match
TOTAL ANNUAL GIFT above

Signature

Date

Thanks for investing in our community through 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 document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.

White Copy: UW

Yellow Copy: Company

Pink Copy: Contributor

► Option A: Community Impact Fund (Makes The Biggest Impact)

United Way's Community Impact Fund is the best choice for better lives. The Community Impact Fund, which supports a combination of partners and initiatives, is distributed by dedicated volunteers who work year round to carefully invest your donation in effective solutions that address Education, Income, and Health needs for those most in need across our region.

► Option B: Focus Areas

Join us by giving to a specific focus area within the Community Impact Fund and help us achieve the following target goals by 2020:

- **Education:** Help our children succeed by increasing our region's on-time graduation rate to 92.5%.
 - › *Your gift of \$8 per week for one year (\$416) provides one month of out-of-school time programming like academic assistance, recreation, and leadership development for one child in need.*
- **Income:** Help equip 25,000 Richmond-area households with the skills and resources they need to achieve greater financial stability.
 - › *Your donation of \$16 per week for one year (\$832) helps a family move from a homeless shelter into stable, permanent housing as rapidly as possible, with 97% of re-housed families avoiding a return to homelessness.*
- **Health:** Help individuals achieve and maintain health and wellness by eliminating social isolation for 25,000 at-risk older adults and people with disabilities.
 - › *Your gift of \$12 per week for one year (\$624) provides two weeks of adult day care services for one adult. Adult day care provides a safe, nurturing environment while allowing the family caregiver to continue to work.*

► Option C

To designate to a specific agency, please note the following guidelines:

- Write the name and address of the agency on the line provided.
- We will honor gifts designated to other United Ways.
- We will honor gifts designated to health and human service agencies that provide substantial services to the residents or people employed in the cities of Richmond, Colonial Heights, Petersburg, and/or the counties of Charles City, Chesterfield, Dinwiddie, Goochland, Hanover, Henrico, New Kent, and Powhatan; have 501 (c)(3) tax exempt status; comply with the Patriot Act; and are registered with the State Office of Consumer Affairs in the Virginia Department of Agriculture and Consumer Services.
- We are not able to honor gifts to agencies that are primarily organized for cultural, academic, religious, or political purposes/political campaigns.

United Way wants to answer all your questions.

Visit our website at www.YourUnitedWay.org to learn more about how you can be a part of helping improve lives in our region through participation in our Women's Leadership Council, Young Leaders Society, and volunteer opportunities.

- Mailing Address: 2001 Maywill Street, Suite 201, Richmond, VA 23230-3236
- Phone: (804) 771-5820
- Email: CustomerService@YourUnitedWay.org

Be sure to follow us on social media too!



YourUnitedWay.org