

Stronger Together



2012 UNITED WAY CAMPAIGN

| | | | |
|-----------------|---------------------|-----------------------|--|
| Name: | | Email Address: | |
| Address: | | | |
| City: | State: Texas | Zip: | |

I'd like to make the following contribution through payroll deduction:

| Semi-monthly | | Monthly | |
|--|--------------------------|--|--------------------------|
| Leadership A gift of .5% of Annual Salary | <input type="checkbox"/> | Leadership A gift of 1% of Annual Salary | <input type="checkbox"/> |
| Fair Share A gift of ½ hour per pay period | <input type="checkbox"/> | Fair Share A gift of 1 hour per pay period | <input type="checkbox"/> |
| A gift of \$_____ over ____ pay periods | <input type="checkbox"/> | A gift of \$_____ over ____ pay periods | <input type="checkbox"/> |
| A one-time gift deduction of \$_____ | <input type="checkbox"/> | A one-time gift deduction of \$_____ | <input type="checkbox"/> |

OR

I'd like to give a one-time gift by cash or check:

Cash/Check (circle one) \$_____

OR

I'd like to give a gift that is directly billed to me through United Way:

Monthly/Quarterly (circle one) Gift \$_____

Do you wish to receive an acknowledgement for your contribution? Yes or No (circle one)

| | | | |
|---|--------------------------|--|--------------------------|
| I wish to receive my acknowledgement by email | <input type="checkbox"/> | I wish to receive my acknowledgement by mail | <input type="checkbox"/> |
|---|--------------------------|--|--------------------------|

OPTIONAL: I wish to designate my gift to the following United Way agency: _____
See the United Way brochure for a list of local agencies.

Signature: _____

Date: _____

United Way does not provide goods or services as whole or partial consideration of contributions. Your copy of this form is acceptable acknowledgement by the IRS of your donation when supported with payroll withholding documentation.