



## Please complete this form and return to HR OR GIVE ONLINE AT WWW.UNITED-WAY.ORG/DONATE



**United Way Emerald Coast** 

	TELL US ABOUT YOURSELF	
Please provide your full name and c	contact information to receive a donation	on acknowledgement/tax receipt.
tale/Female/Non-Binary		
rircle One First Name	Last Name	Workplace Name
Home Address	City	Zip
Personal Email	Cell Phone	Date of Birth
Opt out of marketing and volunteer communications.		
TELL US ABOUT YOUR GIFT		TELL US HOW YOU'D LIKE TO GET INVOLVED
Easy Payroll Deduction I want to contribute the following amount each pay period. \$ I receive paychecks per year.  TOTAL annual gift: \$ By completing this section of this form you are acknowledging that you are signing up fo Should you ever wish to discontinue or change your enrollment, please contact HR. Other automatically rollover from year to year.  Direct Payment I will contribute the following amount; my check/cash is enclosed to the following amount of the	losed (if appropriate):  ")  top of this form)	I would like more information on volunteering, please contact me.  I'm retiring this year and would like to continue supporting United Way, please contact me.  I would like to discuss my gift with someone from United Way.  Contact me about Emerging Leaders, a young professionals group for UWEC volunteers and donors.  Contact me about Women United, a female philanthropy group for donors contributing \$500+ annually.
LET'S MAKE IT OFFICIAL!!	are m stable accor	tricted gifts support multiple programs across the community; these progonitored to ensure they're effective, meet community needs, are financialle, and sustainable. All gifts are assessed a fundraising/administrative fee idance with United Way Worldwide Membership Standards; fee is based o ical information and won't exceed the actual cost incurred.
SIGNATURE	with a year u	e instructions (optional): you may designate to a maximum of two agenci in inimum of \$50 per designation. Designation instructions are valid for unless otherwise renewed by completing a new pledge form. Any designat o not meet these thresholds will be directed to the Community Impact Full will not be able to track results or outcomes of your designated gift.

Thank you for your contribution!

Your privacy and confidentiality are extremely important to us. We will never share your information. Please make a copy or take a photo of your completed pledge form for your records. CH696 A copy of the official registration and financial information of United Way Emerald Coast, principally located in Florida, may be obtained from the Division of Consumer Services by calling toll-free (800-435-7352) or visiting floridaconsumerhelp.com. Registration does not imply endorsement, approval, or recommendation by the State. No goods or services were offered or provided in exchange for this contribution.







