United Way of Central Iowa Commitment Form



agencies.

TELL US ABOUT YOUR									
Mr. Mrs. Ms. Dr. First Name		MI	Last Name				Suffix		
Preferred Name (if different) Former Name (My name has change		me has changed)	DOB (MM/DD/YY	YY)	_ Female	☐ Male	Othe		
Home Address			City		St	ate ZIP			
Employer			Work Phone		Mobile Pho	ne			
Work Email		Non-work Email			Local Union				
TOTAL CONTRIBUTIO	A contribution of \$1,000 or To join a Donor Group or to				· ·	•	queville Sod		
My total contribution for the year:			This is a joint contribution. Spouse/Partner Name						
(required to process pledg		Spouse/Partner Employer			I/We wish to remain anonymous in				
•	pptional) \$		Please list us in reco	gnition materi	als as	recognition	n material		
PAYMENT OPTIONS		□ Ouodii	Cord Doumont		□ Doum	ont Fuologo	.d		
☐ Easy Payroll Deduction		L Crean	Card Payment			ent Enclose	a		
\$10 \$50	ay periods per year:] 12	Please compl	Paid Online at give2uwci.org case complete and submit this paper pledge form your company's campaign representative.		☐ Cash ☐ Check (Payable to United Way of Central lowa)				
Other \$ For your tax records, the IRS requires form along with your payroll receipt, \(\text{to verify any payroll amount withheld} \)	N2, or other employer documents		ress and minimum		Amount End				
		Once N	Once Monthly Quarterly Semi-Annually			☐ Intend to Recommend			
_		Starting on (Mi	Starting on (MM/YY)			From a Donor-Advised Fund			
Thank you for your co	ntribution! Signat	ure				Date			
STRATEGICALLY INVI			s directed to LINC, ELI, a	nd WU will be	e invested before		designatio		
JOIN A Members	s of Donor Groups will be reco up offers special events, volu ommunications about the res	ognized online or i Inteer opportunitie	n local media. s for members, and ment in United Way.	STEP-UP Program	Year Member 1 \$500 2 \$750 3 \$1,000	er Lead) \$1,500) \$2,000	\$5,0 \$7,5 \$10,0		
LINC (Lead. Impact. Network. Change.)	ELI (Education Leadership Initia	tive) Women	United (WU)	LEAD UN		Tocquevill			
Supports essential needs programs, such as shelter and food security.	Supports strategies to ensure youth succeed in school.		trategies to hool readiness.				ports strategies to rove lives through cation, Income, & Healt.		
Please direct \$ to LINC.	Please direct \$to ELI.	Please di \$	rect to WU.		ution of \$1,000 utomatically	A contribution of \$10,00 or more automatically			
Join with an investment of \$250+	JOIN AS: Member (\$1,000)	JOIN AS:		qualifies yo \$1,000) LEAD UNIT		you for qualifies you for			
LINC membership is for young professionals. However, all gifts are welcome.	Lead Member (\$2,500) ELI Tocqueville Society (\$1 Step-up Program Membe (starting at \$500)	(0,000) Womar	of Tocqueville (\$10,000) Program Member Join via		the Program g at \$500)	Step-up P	Join via the Step-up Program (starting at \$5,000)		
Direct your contribution 🔻	Funds directed to these areas will be invested before other optional designations.	Designate to	a specific agency s	50 minimum d	donation. An adminis	strative fee will b	e deducted		
I would like to direct all or part of my contribution Income \$	3		to (specific age			n	o not releas ny informat o these		

Designations below \$50 will be applied to United Way's priorities in Education, Income,

and Health. For more information, please visit unitedwaydm.org/donor-directed.

to United Way's

Health

\$

focus areas:

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Preferred Name (if different)	Former Name (My nam	Former Name (My name has changed)		<u>(Y)</u>	☐ Female	∐ Male	∐ Oth	
Home Address			City		State ZIP			
Employer			Work Phone		Mobile Phon	ie		
Work Email	ī	Non-work Email			Local Union			
TOTAL CONTRIBUTIO My total contribution for the (required to process pledge)	ne year: \$		This is a joint contribution.	Spouse/Par	th focus areas, se		queville Sc	
Loct voor'e contribution:		Spouse/Partner Employer			I/We wish to remain anonymous in			
Last year's contribution: (d	optional) \$		Please list us in recog	gnition materials	as	recognition		
PAYMENT OPTIONS								
☐ Easy Payroll Deduction		☐ Credit	☐ Credit Card Payment		☐ Payment Enclosed			
\$25 \$100	N2, or other employer documents	to your compa	ess and minimum					
☐ Stocks/Securities		Once Mo	Once Monthly Quarterly Semi-Annually			☐ Intend to Recommend		
Please call 515-246-6511 to fa	acilitate the transaction.	Starting on (MA	M/YY)		From a	Donor-Advise	ed Fund	
Thank you for your cor	ntribution! Signati	ıre				Date		
STRATEGICALLY INVI	3		directed to LINC, ELI, a	nd WII will he ir				
JOIN A Members Each group	s of Donor Groups will be reco up offers special events, volur ommunications about the resi	gnized online or in	n local media.	STEP-UP Y	Lead United/EL ear Member 1 \$500 2 \$750 3 \$1,000	I/WU ELI/WU	Tocqu \$5 \$7 \$10	
LINC (Lead. Impact. Network. Change.)	ELI (Education Leadership Initiat	ive) Women	United (WU)	LEAD UNIT	ED	Tocquevill	e Socie	
Supports essential needs programs, such as shelter and food security.	Supports strategies to ensure youth succeed in school.	Supports st improve sch	rategies to nool readiness.	Supports strat improve lives t Education, Inc	through	Supports strat improve lives t Education, Inco	hrough	
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LIVE UNITED

Your United Way contributions help our community reach bold Goals for 2020 in Education, Income (Financial Stability), and Health—the building blocks of a quality life:



Increase the percentage of central lowa students who graduate from high school to 95%.



Increase the percentage of central lowans who are financially self-sufficient to 75%.



Increase central lowa's Gallup National Health and Well-Being Index Score to 64.5.

Learn more at www.unitedwaydm.org

Our commitment to you

United Way of Central Iowa will not sell your information and does not provide goods or services as whole or in partial consideration for any contribution.

See our Privacy Policy at www.unitedwaydm.org/privacy-policy

