



MY INFORMATION I am a current United Way donor and my information has not changed. (Complete only your name & date of birth below)

MR/MRS/MS/DR	FIRST NAME	MI	LAST NAME	DATE OF BIRTH
HOME ADDRESS (For credit card charges, address must be billing address.)			CITY/STATE/ZIP	
HOME PHONE or CELL PHONE (Circle One)		WORK PHONE	EMPLOYEE ID (if applicable)	
PREFERRED EMAIL ADDRESS <i>United Way of Central Illinois keeps your personal information confidential.</i>				

PAYROLL DEDUCTION

1 PLEDGE AMOUNT PER PAY PERIOD

\$5 \$10 \$20 \$40

Other \$ _____

2 PAY PERIODS

_____ pay periods each year.
(12, 24, 26, 52, etc.)

3 TOTAL YEARLY PLEDGE

Multiply amount per pay times number of pay periods

\$ _____ x _____ = \$ _____
Per Pay Pay Periods Total Annual Pledge

OTHER WAYS TO GIVE

ONE TIME GIVING

\$ _____ Total Gift

Cash (enclosed) Check (enclosed)

Credit Card: Card# _____ Exp: Mo ____/ Yr ____
 Visa MC Discover CVC 3 digit code _____

BILL ME

One Time - One time annual pledge of \$ _____ (\$100 minimum)

Monthly - Monthly pledge of \$ _____ (\$25 minimum) for a total annual pledge of \$ _____

SUSTAINED GIVING

You can make ongoing monthly gifts automatically and securely from your bank account or credit card. To sign up, please call 217-726-7000.

RECOGNITION OPTIONS

Leaders Guild
My/Our gift of \$1,000 or more (just \$19.24 a week) qualifies for membership in the Leaders Guild.

Community Builders
My/Our gift of \$500 or more (just \$9.62 a week) qualifies for membership as a Community Builder.

Combined Giving
Recognize my gift with my spouse/partner. List their name & workplace below.

 I wish to remain anonymous.

SIGNATURE

X _____
Donor Signature

_____ Date

Thank you for your contribution to 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 documents showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information. A copy of United Way of Central Illinois' most recent IRS Form 990 & audited financials are available for inspection at United Way's office. Financial information is also available online at www.springfieldunitedway.org.

THANK YOU

OPTIONAL - IF NO OPTION BELOW IS SELECTED 100% OF YOUR GIFT WILL BENEFIT THE COMMUNITY FUND

Thank you for your investment in the Community Fund. 100% of your investment in United Way's Community Fund supports local services addressing Basic Needs, Education, Financial Stability and Health. A gift to United Way's Community Fund is the most effective way to help our whole community.

United Way understands some donors choose to direct a portion of their gift to a United Way issue area or specific nonprofit organization. Although we process these donor-directed contributions as a service to our donors, United Way is unable to guarantee how funds will be used or ensure measurable results by the recipient agency.

<input type="checkbox"/> Alternative United Way Designations	<input type="radio"/> Basic Needs	<input type="radio"/> Financial Stability	<input type="radio"/> Dolly Parton's Imagination Library	Total Amount
	<input type="radio"/> Education	<input type="radio"/> Health	Contributions are equally distributed if more than one issue area is selected	
				\$ _____
<input type="checkbox"/> Donor-Directed Gifts (any 501(c)3 organization)	United Way recovers its fundraising expense of 6.83% from donor-directed gifts. Government Employees: You may designate your gift to one or more qualified 501(c)3 organizations. A complete list of charities qualified by the Illinois State Comptroller is available at www.secaillinois.org. A complete list of 501(c)3 organizations is available at www.irs.gov.			\$ _____
	Organization Name _____			