UNITED WAY OF THE GREATER CHIPPEWA VALLEY ANNUAL PLEDGE FORM





United Way of the Greater Chippewa Valley

YES! I choose to support my community with a gift to United Way.

LET US KNOW HOW YOU'D LIKE TO GET INVOLVED and WE'LL BE IN TOUCH! ☐ Advisory Council ☐ Board Membership ☐ Campaign Cabinet ☐ Emerging Leaders ☐ Team Leadership Circle PERSONAL & WORK INFORMATION: ☐ MR ☐ MS ☐ MRS ☐ MX ☐ DR FIRST NAME _ MI _____ LAST NAME ___ ___ STATE _____ ZIP ___ HOME ADDRESS _ _ CITY ___ ____ CELL HOME PERSONAL EMAIL PHONE BIRTHDATE SPOUSE'S FIRST NAME ___ _ MI ______ SPOUSE'S LAST NAME ___ WORKPLACE _ _ WORK EMAIL __ _____ I ANTICIPATE RETIRING IN $\,\Box$ ONE YEAR $\,\Box$ TWO YEARS ___ EXT ___ WORK PHONE An annual gift of \$500 or more qualifies Receive exclusive event invitations and connect **DID YOU KNOW?** your household for membership in our with like minded people while investing in the Leadership Circle donor group. Chippewa Valley's greatest needs. MY GIFT LAST YEAR WAS: I WISH TO INVEST BY: PAY PERIODS = \$ TOTAL GIFT RECURRING PAYROLL DEDUCTION: PLEASE DEDUCT \$ PAY PERIOD X I WOULD LIKE TO (PAY PERIOD EXAMPLES: WEEKLY (52) / BIWEEKLY (26) / SEMI-MONTHLY (24) / MONTHLY (12) / OTHER ____ INCREASE MY GIFT BY: ONE TIME PAYROLL DEDUCTION: AMOUNT \$ ____ □ 5% DIRECT GIFT: AMOUNT \$ __ □ 10% ☐ CASH (ENCLOSED) ☐ CHECK (ATTACHED) CHECK # _____ CHECK DATE _ □ 15% ☐ CREDIT CARD/ACH (PLEASE VISIT UWGCV.ORG/GIVE OR CALL 715-834-5043 TO MAKE A SECURE DONATION.) MY TOTAL GIFT (MIN \$50) □ INVOICE ME: □ ONCE, SPECIFY DATE _ ☐ QUARTERLY (MIN \$100) **LEGACY GIVING:** □ STOCKS/SECURITIES ☐ PLANNED GIVING YOU WILL BE AUTOMATICALLY ENTERED INTO OUR SWEEPSTAKES WHEN YOU: For prizes, rules & regulations, visit www.uwgcv.org/sweepstakes. No donation necessary. Void where prohibited. Donation will not improve odds of winning. **SWEEPSTAKES:** PLEDGE AS A NEW DONOR, \$1 or more per paycheck (\$24/year). SWEEPSTAKES OPT OUT: PLEASE DO NOT INCLUDE MY NAME INCREASE YOUR PREVIOUS PLEDGE BY \$1 MORE PER PAYCHECK (\$24/year). IN THE SWEEPSTAKES DRAWING I WOULD LIKE MY GIFT TO BE INVESTED IN: PLEASE INVEST MY DOLLARS TO DO THE MOST GOOD. (SUPPORT ALL UNITED WAY INITIATIVES IN CHIPPEWA AND EAU CLAIRE COUNTIES.) CHOOSE YOUR INITIATIVE(S) ☐ HEALTH ☐ EDUCATION ☐ FINANCIAL STABILITY ☐ BASIC NEEDS ☐ DIGITAL EQUITY OPTIONAL DESIGNATION

CHIPPEWA AND EAU CLAIRE COUNTIES

CHIPPEWA COUNTY

DUNN COUNTY

EAU CLAIRE COUNTY I/WE WISH TO REMAIN ANONYMOUS SIGN HERE DATE (ELECTRONIC SIGNATURE - PLEASE TYPE FULL NAME)

