

Step 1 My Information

First name _____ MI _____ Last Name _____ Suffix _____

Address _____ Check if this is a new address Apt. # _____

City _____ State _____ Zip _____

Preferred Phone # _____ Home Business Cell

Preferred Email Address _____

Employer/Dept. _____

THANK YOU!
We'd like to recognize you in our publications. Please tell us how you'd like your name to appear:

I wish to remain anonymous

Please check if you are planning to retire in the next 12 months

Step 2 My Investment Gifts made in Portage County stay in Portage County

MY TOTAL ANNUAL GIFT = \$ _____

Payment Options

1 Payroll Deduction (Per Pay Period) **→** Please deduct \$ _____ per pay x _____ # of pay periods = \$ _____ total donation

2 Bill Me (\$50 minimum) **→** Quarterly One time

3 One Time Gift Visa Mastercard AMEX Check (Payable to United Way)

Card Number: _____ Exp: ____/____ CVV: _____

4 Online Donation - visit www.uwportage.org - please write employer name in the 'Comments' section

Optional Focus My Donation

Most Impact: Direct my contribution to the Community Impact Fund: Amount \$ _____

Direct all or a portion of my contribution to this area of need:

- YOUTH EDUCATION** - helping children and youth achieve their potential: Amount \$ _____
- CRITICAL NEEDS** - empowering individuals to be financially stable: Amount \$ _____
- PUBLIC HEALTH** - building healthy, more resilient communities: Amount \$ _____

I wish to direct this portion of my contribution to one or more of United Way's partner agencies (minimum donation of \$48 for 1 org, \$96 for 2 orgs, \$144 for 3 orgs, \$192 for 4 orgs, etc.):

_____ Amount \$ _____

Agency(s) to direct may donation --- list of our partner agencies can be found on page 3

STEP 3 Your Signature

SIGNATURE _____ DATE _____