

1. TELL US WHO YOU ARE

Personal information, including email address, is never shared with third parties.

MR/MRS/MS/DR _____ FIRST NAME _____ MI _____ LAST NAME _____ SUFFIX _____

COMPANY NAME _____

HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOME EMAIL _____ WORK EMAIL _____

PHONE HOME CELL WORK

2. CHOOSE WHERE TO DIRECT YOUR GIFT

All or part of your gift may be directed to the Community Impact & Innovation Fund or a specific target area by completing A, B and/or C.

A Give directly to United Way of Chester County's **COMMUNITY IMPACT & INNOVATION FUND** \$ _____
 The Community Impact & Innovation fund is designed to provide UWCC the needed flexibility to quickly inject funding into various programs and community organizations in support of our neighbor ALICE.

B Give to a specific area of focus within the **COMMUNITY IMPACT & INNOVATION FUND**:

 EDUCATION	 HEALTH	 FINANCIAL STABILITY	 BASIC NEEDS
\$ _____	\$ _____	\$ _____	\$ _____

C Give to another nonprofit United Way of Chester County encourages unrestricted contributions to the Community Impact & Innovation fund but will honor gifts to an eligible IRS 501(c)(3) agency or another United Way. UWCC has no oversight over agencies receiving designated donations. Be sure to include a complete address and phone number for the designated agency. If a designation cannot be processed for any reason the contribution will be directed to the Community Impact & Innovation Fund. Additional designations may be attached.

AGENCY NAME _____ AMOUNT \$ _____
 AGENCY ADDRESS _____ PHONE _____

3. CHOOSE YOUR PAYMENT METHOD

(Total gift = pledge amount x frequency and should reflect the total of A+B+C)

Payroll Deduction

Per Pay Pledge Amount

\$100 \$50 \$25 \$20 \$15 \$10 \$7 \$5 \$3 Other \$ _____

Frequency (# of annual pay periods)

Weekly (52) Every 2 weeks (26) Twice a month (24) Monthly (12) Other _____

One-Time Gift

\$1000 \$750 \$500 \$250 \$200 \$150 \$100 \$75 \$50 Other \$ _____

CASH CHECK (Payable to United Way of Chester County) Check # _____ / Date _____ BILL ME (\$50 minimum to be billed)

CREDIT CARD VISA / MC / AMEX / DISC (Circle one) *Credit card gifts can also be made online at www.GiveToUnitedWay.org

No. _____ Exp. _____ / _____ CVV _____

TOTAL GIFT AMOUNT

\$ _____

Please sign here to authorize your pledge.

X

SIGNATURE (Required)

DATE

Your gift of \$1,000 or more qualifies for the Leadership Giving Society.

Please list my/our name(s) as follows:

I/we prefer to remain anonymous.