PERSONAL INFORMATION (please print clearly):

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Male ☐ Female

First Name **M.I.** **Last Name**

Birthdate _____/_____/_____

Home Address _____

City, State, Zip _____

How long at current address? _____

Home Email _____

Home Phone _____

Cell Phone _____

Employer Name _____

How long at current employer? _____

Work Email _____

Work Phone _____ Ext. _____

United Way Fox Cities does not sell or share our list of contributors with other organizations soliciting funds. We do not provide goods or services in whole or partial consideration for any contribution made to the organization via this pledge form.

PAYMENT OPTIONS (choose one):

1. ☐ **PAYROLL DEDUCTION:**
   - ☐ One hour's pay per month. $_____
   - ☐ I want to contribute the following amount per pay period:
     $100___ $75____ $50____ $25____ $10____
     Other $_____ Number of pay periods_____
   - ☐ One time deduction (if company allows).
2. ☐ **CHECK** #_____ (Make payable to United Way Fox Cities)
3. ☐ **CASH**
4. ☐ **CREDIT CARD** (check one)
   ____Visa ____Discover
   ____MasterCard ____American Express
   Acct # | | | | | | | | | | | | | | | |
   Expiration Date _____ Security Code _____
   Date to Be Charged _____/_____/_____
   Billing address if different than above_____
   _____
5. ☐ **BILL ME** ($50 minimum)
   ____ Quarterly (starting in January at address above)
   ____ One Time (on month____/ year____)
6. ☐ **STOCKS/SECURITIES** - Call United Way Fox Cities at (920)954-7210.

LIVE UNITED™

United Way Fox Cities
1455 Midway Rd.
Menasha, WI 54952
(920)954-7210

Carbonless paper donated by APPLETON What Ideas Can Do™

EDUCATION, INCOME AND HEALTH
Building Blocks for a Good Life

United Way believes a good life includes a quality education that leads to a stable job, enough income to support a family and good health.

- **Education:** United Way is an advocate for early childhood learning, quality childcare and school readiness.
- **Income:** United Way focuses on solutions to increase financial stability for individuals and families.
- **Health:** United Way works to improve access to quality physical and mental health care.

WIN A 2012 FIAT 500! Donated by Bergstrom Automotive.

BERGSTROM

Any new, *undesignated* gift of at least $26, or an *undesignated* gift that has increased by at least $26 from the previous year, qualifies you for one entry in the Fiat Sweepstakes. Entrants must be legal residents of Wisconsin, at least 18 years of age, and possess a valid driver's license. Pledges must be received by United Way on or before 12/2/11 to qualify for the drawing. Void where prohibited; pledge will not improve chances of winning. No gift necessary. For complete rules and more information visit our website at www.unitedwayfoxcities.org.

EMERGING LEADERS AND LEADERSHIP GIVING

Giving Levels		Per Week
Tocqueville Society	$10,000 & above	$192 & above
Founder	$ 7,500 - $9,999	$144 - $192
Keystone	$ 5,000 - $7,499	$ 96 - $144
Cornerstone	$ 2,500 - $4,999	$ 48 - $ 96
Pillar	$ 1,500 - $2,499	$ 29 - $ 48
Horizon	$ 1,000 - $1,499	$ 19 - $ 29
Emerging Leader*	$ 500+	$ 10+

(*Recommended for ages 40 and under)

☐ My individual gift of $1,000 or more to United Way Fox Cities qualifies me as a **Leadership Giver.**

☐ My gift = $1,000 or more when combined with my spouse's gift to United Way Fox Cities.
Spouse/Partner Name: _____
Spouse/Partner Company:_____

☐ My gift of $500 or more qualifies me as an **Emerging Leader. (Recommended for ages 40 and under.)**

For recognition in the annual report, my/our name should read as follows:

☐ I/we prefer to remain anonymous.

MY ANNUAL GIFT

Signature _____ Date_____

☐ I am interested in learning more about Emerging Leaders.
☐ I qualify as a **Loyal Donor** (10-24 years____ 25+ years____) of giving to United Way. Does not have to be consecutive.
☐ I have included United Way in my estate plan.
☐ I would like information on including United Way in my estate plan.

Optional Designated Gift - *Direct part or all of my gift to the following not-for-profit 501(c)(3) health/human service organization.* ***(Does not qualify for sweepstakes.)***
Please direct $_____ to United Way Fox Cities (over 100 funded programs and initiatives, serving over 100,000 people in our community).
Please direct $_____ **$50 minimum**
to _____ or _____ _____
(agency name) (other United Way) (mailing address)

☐ Yes, I would like acknowledgement of my designated gift.

If the designation is to a United Way Fox Cities community partner agency, it will go directly to support United Way funded programs. It will not increase the partner agency's investment unless the total of all designated gifts exceeds the amount recommended by United Way Fox Cities' volunteers.

Top Copy – United Way **Yellow Copy – Employer** **Pink Copy – Investor**

THANK YOU FOR YOUR 2011-2012 INVESTMENT!