

# I WANT TO MAKE A DIFFERENCE TODAY!



**UNITED WAY**  
Rock River Valley

YES! I pledge to invest in my community.

We use contact information to process gifts and occasionally tell you about community impact; we will not share it.

## 1 ABOUT ME

PREFIX \_\_\_\_\_ FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

EMPLOYER \_\_\_\_\_

EMAIL \_\_\_\_\_  WORK  PERSONAL \_\_\_\_\_ PHONE \_\_\_\_\_  WORK  PERSONAL

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

I WISH TO REMAIN ANONYMOUS. PLEASE DO NOT USE MY/OUR NAMES FOR RECOGNITION PURPOSES.

## 2 MY INVESTMENT

**EASY PAYROLL DEDUCTION**

**Investment per paycheck:**

- \$250    \$150    \$100    \$75  
 \$50    \$25    OTHER: \_\_\_\_\_

**Your employer's pay periods per year:**

- 12 (MONTHLY)    24 (BI-MONTHLY)    26 (BI-WEEKLY)  
 52 (WEEKLY)    OTHER: \_\_\_\_\_

**Total Annual Payroll Deduction** (investment x pay periods) = \$ \_\_\_\_\_

**CASH, CHECK, OR CREDIT CARD**

**Giving frequency:**

- 12 (MONTHLY)    4 (QUARTERLY)    ONE-TIME

- CASH  
 CHECK  
CHECK # \_\_\_\_\_

**Gift amount:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_

DATE: \_\_\_\_\_

**Total Annual Payment** (frequency x gift) or cash / check total = \$ \_\_\_\_\_

- CREDIT (SEE BOTTOM)

**ONLINE DONATION**



**Scan the QR code to donate online!**

Be sure to enter your employer name in the online form.

If the QR code is not working, visit [unitedwayrrv.org](http://unitedwayrrv.org) and click on the red donate button in the top right corner of your screen.

## 3 MAKE IT OFFICIAL: \_\_\_\_\_ DATE \_\_\_\_\_ **THANK YOU!**

**OPTIONAL: DONATION PREFERENCES**

You choose where your money goes. If no selection is made, we will use your donation where it is needed most!

I WANT TO HELP MY COMMUNITY IN THE MOST IMPACTFUL WAY POSSIBLE: **INVEST MY MONEY WHERE IT IS NEEDED MOST.**

I WANT TO SUPPORT A SPECIFIC **IMPACT AREA:**

- YOUTH OPPORTUNITY \_\_\_\_\_%  
— COMMUNITY RESILIENCY \_\_\_\_\_%

PLEASE DESIGNATE MY DONATION TO ANOTHER UNITED WAY OR WINNEBAGO COUNTY 501(C)(3):\*

NAME: \_\_\_\_\_

\*Designations must be a minimum of \$100, and a 5% fee will be applied.

If the designated organization is not a registered 501(c)(3), does not qualify as a benefitting organization, or is not identifiable, we will invest your donation where it is needed most.

Credit Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_/\_\_\_\_\_ Security Code: \_\_\_\_\_

I WANT TO MAKE THIS A PERPETUAL INVESTMENT. Check here to make your credit card gift ongoing, until you request otherwise.