



Employee ID # & Department _____ Information required for Payroll Copy Only.
This section is blacked out on next two copies.

First, Middle Initial, Last _____ Recognition Name (may include spouse/partner) _____

Billing Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Primary Email _____

Company/Community _____ Preferred method of contact _____

MY GIFT **Sextant Club:** my gift of \$500 - \$999 (example: \$21/pp x 24p = \$504) **Keel Club:** my gift of \$1,000 - \$9,999 (example: \$42/pp x 24p = \$1,008) **Alexis de Tocqueville:** my gift of \$10,000 (example: \$417/pp x 24p = \$10,008)

PAYROLL DEDUCTION
 \$3 \$5 \$10 \$21 Sextant Club \$42 Keel Club \$_____ Other

Pay periods: 2x month (24 per year) Bi-Weekly (26 per year) Weekly (52 per year) Other _____

Total pledge: \$ _____ X _____ = \$ _____
 Amount Per Pay Period Number of Pay Periods Total Annual Pledge

SINGLE PAYMENT Amount \$ _____ Cash or Check enclosed Check # _____, payable to **United Way.**

Credit Card: VISA MASTERCARD AMERICAN EXPRESS

Amount: \$ [][][][][][] . [][] Billing Zip Code: [][][][][][]

[][][][][][][][][][][][][][][][][] [][][] / [][][] [][][][][][][][]
Card Number (Email required for credit cards and to receive receipts.) EXP Month Year Security Code

I would like my gift to make an impact in the community where I live. Please direct my gift to the following county:
 Lee Hendry Glades Other _____

Fields of Service

- Strengthening Families**
Moving families and individuals beyond poverty; facilitating support groups to empower victims to regain control of their lives; providing assistance to abused women and their children.
- Nurturing Children and Youth**
Ensuring a quality early childhood education opportunity for all children; providing mentoring programs for youth; providing at-risk youth with programs to build and strengthen their character.
- Supporting Veterans**
Meeting the needs of Veterans and Active Duty service members through Mission United; coordinating various Veteran Support organizations.
- Meeting Critical Needs**
Helping the elderly and people with disabilities live independently, with dignity and respect; responding to people in crisis; providing emergency food; connecting people in need of help through United Way's 211 Information and Referral Help Line.
- Empowering Communities**
Organizing and mobilizing communities; bringing health and human services to neighborhoods; connecting providers and residents through partnerships; connecting volunteers to meaningful opportunities.
- Community Fund**
Meeting all of the fields of services listed.

For additional information, please visit: UnitedWayLee.org

Please sign here to authorize your pledge:

Signature _____ **Date** _____

Thank you! Your privacy is important to us. Your information will not be shared or sold.

The United Way of Lee, Hendry, and Glades is a 501(C)(3) nonprofit corporation registered pursuant to Chapter 496, Section 496.405 of the Florida Statutes. A copy of the official registration (CH31) and financial information may be obtained from the Division of Consumer Services by calling toll-free (1-800-435-7352) within the state or from its website at WWW.800HELPFLA.COM. Registration does not imply endorsement, approval, or recommendation by the state. EIN#: 59-1005169