

Monadnock United Way Pledge Form



Thank you for investing in our community!

1 MY INFORMATION

Mr./Mrs./Ms./Dr. First Name _____ Last Name _____
(circle one)
Home Address _____ Apt. # _____
City _____ State _____ Zip _____ Birthdate (mo/yr) _____
Preferred Email Address _____ Personal Work
Preferred Phone _____ Home Work Cell
Employer _____ I am retiring this year

2 MY CONTRIBUTION

MY TOTAL ANNUAL GIFT \$ _____

Payroll Deduction - I authorize my employer to deduct \$ _____ per pay period(s):

Weekly Biweekly Semimonthly Other: _____

Cash or Check - Attached and payable to Monadnock United Way Check # _____

Personal Billing - Please send my personal billing statement (home address required):

Incremental amount \$ _____ Monthly Quarterly One time Start date _____

Credit Card MasterCard Visa American Express Discover

Account # _____ Exp. Date _____

Please charge: Incremental amount \$ _____ Monthly Quarterly One time

Direct Debit (via checking account)

Bank Routing # _____ Bank Account # _____ Start date _____

Please charge: Incremental amount \$ _____ Monthly Quarterly One time

Signature (Required) _____ Date: _____

3 DONOR DESIGNATION (OPTIONAL)

Your gift will be directed to the Community Fund unless otherwise specified.

IMPACT FUNDS Directing your gift to a specific impact area will ensure that the complex needs of individuals and families are met.

CHILDREN EDUCATION FINANCIAL STABILITY (AND BASIC NEEDS)

DIRECT CARE: I wish my gift to go to a specific human service agency or another United Way. (Designations to specific agencies must be \$50 or more).

Name(s): _____

CARE WITH EXCEPTIONS: I wish to support the entire family of United Way agencies, with the exception of :

Name(s): _____

Please release my name to the designated agency or United Way for an acknowledgement: YES NO

Signature (Required) _____ Date: _____

4 ACKNOWLEDGEMENT

GRAND MONADNOCK RAPELLING TEAM

Tocqueville	\$10,000 or more
Rapeller	\$5,000 - \$9,999
Great Descender	\$2,500 - \$4,999
Trailblazer	\$1,000 - \$2,499
Leap Leader	\$500-\$999

MUW CHAMPIONS

Game-changer	\$250-\$499
Hand-raiser	\$100-\$249

RECOGNITION

I am a loyal donor who has contributed for _____ years.

Please combine my gift with my spouse/partner.

Name _____

Employer _____

Please list my/our name(s) as below in all recognition materials.

(please print clearly)

I prefer to remain anonymous.

I have included United Way in my will/estate plans.

I would like additional information about planned giving options.

PRIVACY POLICY We do not rent, trade or sell information about our donors. If you provide your electronic mail address, we will only use it to personalize the information you receive from us.

IMPORTANT TAX INFORMATION Gifts to Monadnock United Way are tax deductible within the limits of current federal and state law. Tax laws require a receipt for individual payments of \$250 or more to a charity. If you have any single payment above \$250 for the tax year, we will send you a receipt (please provide your full home address). Please keep a copy of this pledge form, along with your paycheck records or cancelled check to serve as a record of your donation in accordance with IRS regulations.