



TOGETHER WE THRIVE.

Your life-changing gift builds the foundation for a brighter future. Thank You!



2019/2020 Greater Twin Cities United Way Pledge Form

404 South Eighth Street, Minneapolis, MN 55404-1084 | (612) 340-7400 | gtcuw.org

My United Way Investment (choose one or more of these giving options):

- 1 Community Fund:** \$ _____
I want to support the area of greatest local need with a gift to the Community Fund.
- 2 I want to direct my gift to:**
- Educational Success**
provide high-quality education from cradle to career
\$ _____
 - Economic Opportunity**
support training for sustainable employment
\$ _____
 - Household Stability**
prevent hunger and homelessness
\$ _____
 - Women United**
support success for women and children
\$ _____
(Minimum annual gift of \$1,000)
 - Arise Project**
support LGBTQ homeless youth
\$ _____
(Minimum annual gift of \$500)
 - Emerging Leaders**
join other up-and-coming professionals to support local needs
\$ _____
(Minimum annual gift of \$500)

X Signature (required) _____ **Date** _____

My Information Please print firmly in ALL CAPITAL letters. Your personal information is kept confidential. Please list home address, phone and email to receive recognition and tax receipt letters.

First Name MI Last Name

Spouse's/Partner's Name (Combine and recognize my gift with my spouse/partner.)

Home Address City

State Zip Preferred Phone Home Cell Work Preferred Email: _____

I want my gift to remain anonymous in all recognition materials. I am a union member.
 I would like information about Planned Giving at United Way. I wish to be listed in recognition materials as follows: _____
 I have included United Way in my will/estate plan.

My Giving Options Important tax information: Per IRS Notice 2006-110, be sure to keep a copy of this form for your tax records.

Easy Payroll Deduction \$ _____ x _____ = \$ _____
I will contribute each pay period Pay periods per year My total annual gift

Make a one-time gift of \$ _____ (Must equal total investment from section above.)
 Cash
 Check (attached). Checks cashed upon receipt.
 Credit/Check Card (Visa/Mastercard/DISCOVER/American Express). We respect your privacy, so to make your gift by credit or check card, visit gtcuw.org/pledge.

Bill me in 2020 \$ _____ If requesting a bill, please provide a home mailing address.
 Semi-annually Quarterly One-time _____ (month)

To give a gift of stock, please use the 'Bill me' option and contact our stock coordinator at stock@gtcuw.org for further instructions on making a stock transfer or with any questions.

Gift restriction is offered as an optional service. The most effective way to help the community is by making an unrestricted gift to United Way.

Designate a gift to a specific 501(c)(3) or another United Way. \$ _____
Read our designation policy at: gtcuw.org/donate/designation-policy. (Full agency name and address required below.)

Agency Name Address City/State/Zip

I wish to remain anonymous to the above organization. (If you check the anonymous box in the MY INFORMATION section, your name will remain anonymous to all organizations.)

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Thank you for your generosity!

Your gift may be tax-deductible and will support health and human services in 2020. United Way acknowledges no goods or services were provided in exchange for your gift.