

STEP #1

MY INFORMATION

Mr./Ms. _____ Last Year's Gift _____

First Name M.I. Last Name

Home Address _____ City _____ State _____ Zip _____

Employer Name _____ Personal Email Address _____

STEP #2

MY GIFT

- PAYROLL DEDUCTION** (amount per pay period)
 One hour's pay _____ \$20 \$10 \$5 \$3
 Other \$ _____ X total # of pay periods _____
- CHECK # _____
 (please attach & make payable to Marshfield Area United Way)
- CASH (please attach)
- CREDIT CARD
 Visa MasterCard Discover
 Account # _____
 Exp _____
- BILL ME (\$25 minimum)
 _____ Quarterly (starting in January)
 _____ Semi-annually (January & July)
- STOCKS/SECURITIES - call United Way at (715) 384-9992

LEADERSHIP GIVING



- My individual gift of \$500 or more to Marshfield Area United Way qualifies me as a Leadership Giver.
- My gift = \$500 or more when combined with my spouse/partner's gift to Marshfield Area United Way
 Spouse/Partner's Name _____
 Employer _____ Gift _____

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

- I/We prefer to remain anonymous.
- I DO NOT WANT to receive a recognition pyramid.
- I DO NOT WANT to receive a year plate for my pyramid.

Total Donation Amount \$

STEP #3

SIGN HERE 

Date _____

I have been contributing to United Way for _____ years.

STEP #4

PLEASE CHOOSE HOW YOU WANT TO INVEST IN YOUR COMMUNITY.

OPTION A _____

- INFLUENCE THE CONDITION OF ALL.** United Way community Investment Fund. The most powerful way to invest your contribution.

OPTION B _____

- EDUCATION** Helping children and youth achieve their full potential
- INCOME** Helping families become more financially stable and independent
- HEALTH** Improving people's health

OPTION C _____

- Restricted Contribution—Amount \$ _____
 Agency/other United Way Name _____ Address _____