



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

1. **PAYROLL DEDUCTION** (amount per pay period)
 One hour's pay _____ \$20 \$10 \$5 \$3
 Other \$ _____ X total # of pay periods _____
2. **CHECK #** _____
 (please attach & make payable to Marshfield Area United Way)
3. **CASH** (please attach)
4. **CREDIT CARD**
 Visa MasterCard Discover
 Account # _____
 Exp _____
5. **BILL ME** (\$25 minimum)
 _____ Quarterly (starting in January)
 _____ Semi-annually (January & July)
6. **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.

I plan to retire this year.

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 _____