

DESIGNATE YOUR GIFT

To process a designated gift, a signed copy of your completed pledge card must accompany this request and be returned to your company's campaign coordinator. (Please print.)

Mr./Mrs./Ms. First Name _____ MI _____

Last Name _____

Home Address _____

City _____ State _____ Zip _____

Home Work Email _____

Employer _____

PLEASE CHOOSE HOW YOU WANT TO INVEST IN YOUR COMMUNITY:

INFLUENCE THE CONDITION OF ALL

United Way Community Action Fund _____ Amount \$ _____
(The most powerful way to invest your contribution)

DIRECT CONTRIBUTION (\$50 minimum required)

Direct designations will be assessed a one time processing fee of \$5.20.

I choose to help people through the specific United partner agency(cies) listed below.

Organization _____ Amount \$ _____

Organization _____ Amount \$ _____

Please check here if you want your designated agency to receive your name, address and amount donated.

UNITED CARE

I wish to direct my gift to a United Way in another community. I would like my gift redirected to:

Winnebago County

Ogle County

The United Way in the following community: _____ Amount \$ _____

City _____ State _____ Zip _____

Total Annual Designated Gift Amount \$ _____

There is no processing fee for gifts to other United Ways. Designations are subject to a pledge loss assessment. United Way will not share this information with any other organization without consent.

SIGNATURE

_____ Date _____

United Way of Rock River Valley

612 North Main Street, Suite 300

Rockford, Illinois 61103

P 815.968.5400 • F 815.968.5878

www.unitedwayrrv.org



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