

2018-19 GIVING FORM

STEP 1: PLEASE TELL US ABOUT YOURSELF

NAME (FIRST, MIDDLE INITIAL, LAST) _____

HOME ADDRESS (REQUIRED FOR CARING CLUB) _____

DOB (MM/DD/YYYY) _____

CITY, STATE, ZIP _____

SSN (LAST 4 DIGITS) _____

HOME PHONE _____

WORK PHONE _____

HOME EMAIL (REQUIRED FOR CARING CLUB) _____

WORK EMAIL _____

EMPLOYER _____

WORK ZIP CODE _____

I am a member of a labor union: _____ GENDER: Male Female OtherYears giving to United Way: New donor 5-10 11+ETHNICITY: American Indian or Alaska Native Asian Black or African American
 Hispanic or Latino Native Hawaiian or Other Pacific Islander White

STEP 2: MAKE YOUR CONTRIBUTION

TOTAL CONTRIBUTION: \$ _____ OR _____ % OF SALARY.

Any gift of \$250 or more, designated to United Way or one of our three impact areas, qualifies you for Caring Club membership.

As a member you'll receive discounts around town. Your personal email and home address are required.

PAYMENT METHOD

 EASY PAYROLL DEDUCTION

\$ _____ Per pay period

 ONE-TIME CONTRIBUTION (ENCLOSED) Check (made payable to United Way) Cash PLEASE BILL ME: Once Monthly Quarterly

BEGIN BILLING Month _____ Year _____

 I INTEND TO RECOMMEND A DISTRIBUTION FROM A DONOR-ADVISED FUND IN THE AMOUNT OF:

\$ _____ FUND NAME: _____

 CREDIT/DEBIT CARD; AUTOMATIC WITHDRAWAL FROM BANK; STOCKS/SECURITIES

Please complete and submit this form and call UWGKC at (816) 559-4627

CUSTOMIZE YOUR CONTRIBUTION

 Direct all or part of my contribution to the United Way impact area(s) I feel most strongly about: HEALTH \$ _____ EDUCATION \$ _____ FINANCIAL STABILITY \$ _____ THIS IS A JOINT CONTRIBUTION WITH MY SPOUSE/PARTNER

Spouse/Partner Name: _____

Spouse/Partner Employer: _____ Spouse/Partner Email: _____

 I WOULD LIKE TO JOIN ONE OF UNITED WAY'S DONOR NETWORKS Tocqueville Society
\$10,000 and above annual contribution
Join this distinguished giving society Women United
\$2,400 and above annual contribution
Philanthropic women focused on education LeadUnited (includes AALI/LLI/YLS)
\$1,200 to \$9,999 annual contribution
Make meaningful connections and create change LINC
\$250 to \$1,200 annual contribution
Socialanthropy™ for professionals under age 30 I am interested in learning about including United Way in my estate plans. Contact me at: _____

PHONE

SIGNATURE _____

DATE _____

PLEASE LIST ME/US IN UNITED WAY PUBLICATIONS AS: _____

Please return completed form to your Employee Campaign Manager or send to:
United Way of Greater Kansas City / P.O. Box 871400 / Kansas City, MO 64187-1400

United Way
of Greater Kansas City



Your contribution is tax-deductible; United Way does not provide any goods or services in exchange for contributions. For your tax records, the IRS requires you to keep a copy of this form along with your payroll receipt, W-2 or other employer documents to verify any payroll amount withheld and paid to United Way. United Way of Greater Kansas City will provide a receipt for all non-payroll deduction gifts of \$250 or more. If you wish to specify a donor-directed contribution, please ask your company's Employee Campaign Manager for a donor-directed contribution form. Donor-directed forms must be signed by the donor and submitted with this completed form. For United Way's privacy policy, please visit www.unitedwaygkc.org/about/privacy