

2019-20 PLEDGE FORM

LIVE UNITED®



United Way of South Central Idaho

United Way of South Central Idaho fights for the health, education and financial stability of everyone in our community.

STEP 1

Mr/Mrs/Ms/Dr First Name MI Last Name Jr/Sr

Birth Date Personal Mailing Address

City State Zip Code Employer

Phone Number Cell Home Personal Email Address Please send my confirmation to this email account

I would like to learn more about: Volunteerism Women United volunteer group United Way NEXT (Millennial aged group) Encore United (retiree volunteer group)

STEP 2

Choose your amount and method of payment.

Easy Payroll Deduction:

I want to contribute the following amount each pay period.
(If you are paid every other week, use 26 pay periods. If twice a month, use 24 periods.)

\$ _____ x _____ = \$ _____
Per Paycheck Pay Periods Payroll Deduction Amount

Cash (enclosed): \$ _____ Cash Enclosed

Check (enclosed): \$ _____ Check Enclosed

Total Gift Amount \$ _____

Amount \$ _____

Credit Card: I have donated using my credit card at unitedwayscid.org

STEP 3

Please choose how you want to help your community.

option A

UNITED WAY COMMUNITY FUND
Invest my donation to address the most pressing needs in the community AMOUNT % _____

option B

EDUCATION Helping children achieve their potential through education AMOUNT % _____

FINANCIAL STABILITY Helping families become financially independent AMOUNT % _____

HEALTH Improving the health & wellbeing of children & families AMOUNT % _____

BASIC NEEDS Providing emergency support to children & families AMOUNT % _____

option C

Designated Contribution - Total Gift Amount must be at least \$180 in order to make designated contributions.

AMOUNT \$ _____ AGENCY NAME _____ AGENCY ADDRESS _____ (Must be a 501(c)3 Nonprofit registered with the IRS)

I would like to remain anonymous to the designated nonprofit organization.

Signature _____ Date _____

Thank you for investing in United Way of South Central Idaho!

Please check the accuracy of all your entries. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records.



**THANK YOU FOR
JOINING THE FIGHT!**

LIVE UNITED®

Payroll Deduction Calculator

2019-20 United Way Community Impact Campaign

Depending on how much you donate through an automatic payroll deduction and what type of pay schedule your company uses, here is a breakdown of per-paycheck contributions:

Weekly <i>(52 paychecks)</i>	Every 2 Weeks <i>(26 paychecks)</i>	Twice a Month <i>(24 paychecks)</i>	Total Gift
\$35.....	\$70.....	\$77.....	\$1,820 - \$1,848.....
\$30.....	\$60.....	\$66.....	\$1,560 - \$1,584.....
\$25.....	\$50.....	\$55.....	\$1,300 - \$1,320.....
\$20.....	\$40.....	\$44.....	\$1,040 - \$1,056.....
\$15.....	\$30.....	\$33.....	\$780 - \$792.....
\$10.....	\$20.....	\$22.....	\$520 - \$528.....
\$5.....	\$10.....	\$11.....	\$260 - \$264.....
\$3.50.....	\$7.....	\$8.....	* \$182 - \$192.....
\$1.....	\$2.....	\$2.....	\$48 - \$52.....

Calculate your donation's impact at UnitedWaySCID.org