

Campaign Envelope Info



Please print clearly and fill out all of Sections 1-4.

Section 1:

- Be sure to include a payment contact name and phone number should we have a question about payments.

Section 2 and Section 3:

- If applicable, please check when your company would like to be billed for corporate pledges or payroll deductions.

Section 4:

- Separate each type of pledge and write the total number of donors and the amount donated for each type in this section. Please note that any money raised during a special event is listed separately.
- The money bags have two sections. The top is for CASH and COINS ONLY. The bottom is for CHECKS. Please do not include pledge forms in these bags.
- Check all credit card forms to make sure they include expiration date and billing address.
- Please make sure all pledge forms have been signed by the donors. Also, keep your eye out for multiple pledge forms from the same donor.
- If you are turning in pledge forms from other parts of the state, please make sure we are aware of this before you turn in your envelope.
- Please seal the envelope and make sure to sign and date the back.

Thank you for your support of the 2011 United Way of the Midlands campaign.

If you have any questions or need help filling out your envelope do not hesitate to contact us.

Amanda Keating
803-733-5402
akeating@uway.org

Peg Nichols
803-733-5405
pnichols@uway.org

1800 Main Street Columbia, SC 29201 803-733-5400																																																																					
Employee Campaign Summary Report																																																																					
Include only those employee and corporate contributions that have not previously been submitted. <input type="checkbox"/> Partial <input type="checkbox"/> Final																																																																					
1. Company Name _____ ID _____		Billing Address _____																																																																			
Street Address _____		_____																																																																			
ECC Name _____		Payment Contact Name _____																																																																			
UWM Staff _____		Phone Number _____																																																																			
Total # of Company Employees _____		_____																																																																			
NAICS Code _____		_____																																																																			
This section to be completed by Company Representative																																																																					
2. Corporate Giving Information																																																																					
Corporate Gift \$ _____ (card and check enclosed)		_____																																																																			
Corporate Pledge \$ _____ (card enclosed)		_____																																																																			
This is a GCL Account _____																																																																					
Bill: Please check <u>one</u> billing option.																																																																					
Monthly _____ Jan-Dec	Semi Annually _____ Jan/Jul _____ Feb/Aug _____ Mar/Sep	_____																																																																			
Quarterly _____ Jan-Apr-Jul-Oct _____ Feb-May-Aug-Nov _____ Mar-Jun-Sep-Dec	_____ Apr/Oct _____ May/Nov _____ Jun/Dec	_____																																																																			
Annually _____ (Specify Month) _____		_____																																																																			
3. Employee Payroll Payment Bill: Please check <u>one</u> billing option																																																																					
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4. Employee Pledge Summary (See pledge descriptions on reverse side of envelope before completing this section.)																																																																					
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GIVE. ADVOCATE. VOLUNTEER.
LIVE UNITED

LIVE UNITED™

Pledge Form Info



United Way
of the Midlands

Please print clearly and fill out all of Sections 1-6.

Section 1:

- This section is important so we know how to thank you for your donation.
- Please note that the billing address is required for all credit card and bill direct gifts.
- You may indicate if you would like an electronic acknowledgement, which helps save on postage costs.

Section 2

- Where you indicate how you would like their contribution used. It can all go to United Way Community Impact, or one of our three focus areas.

Section 3

- You can give by payroll deduction, cash, check, money order, or credit card.
- We can also do recurring credit card payments or bill you directly. For these options please list a date for us to begin.
- Please make sure that all credit cards also have an expiration date and the billing address listed in Section 1.

Section 4

- Affinity groups such as Young Leaders Society and Women in Philanthropy are indicated in this section. For Women in Philanthropy a designation to code 9595 is required in Section 5.
- This is also the section to indicate any recognition names and if you would like to remain anonymous.

Section 5

- Please make sure to sign your pledge form.
- Although we encourage everyone to donate to United Way Community Impact, if you feel strongly about a particular partner agency, this where designations are listed. Please note there is a \$50 minimum per designated agency.

Section 6

- This section is detachable and can be used for tax purposes. Please note, for gifts via payroll deduction, you will also need a copy of your W-2 showing how much your employer actually deducted throughout the year.

United Way of the Midlands Pledge Form
LIVE UNITED
Thank you for creating opportunities and inspiring hope for a better tomorrow.

1. MY INFORMATION

MR/MRS/MS/DR FIRST NAME _____ MI _____ LAST NAME _____ (R/SR/III/etc.) _____
 HOME ADDRESS (For credit card charges, address listed must be your billing address.) _____ APARTMENT NUMBER _____ CITY _____
 STATE _____ ZIP _____ PHONE HOME _____ WORK _____ CELL _____ DATE OF BIRTH (MM/DD/YYYY) _____
 COMPANY NAME _____ EMPLOYEE ID _____
 EMAIL ADDRESS _____ IS NUMBER _____

Please cut postage costs and send me an electronic acknowledgement of my contribution to this email.
 I want to see how my contribution is making a difference. by giving us your email address (home email preferred) you will receive United Way of the Midlands' eNewsletter, which provides opportunities to LIVE UNITED year-round.

2. PLEASE CHOOSE HOW YOU WANT TO INVEST IN YOUR COMMUNITY. A pledge of \$180 or more will qualify you to receive the Community Investment discount card. Find out more on the back of this form.

My contribution through United Way helps everyone have an opportunity for a good life—a quality education that leads to a stable job, enough income to support a family through retirement and good health. Please use my contribution to help with ALL of these issues. **OR**

I want my total contribution to specifically help ONE of the following issues:
 A. I want to build ladders out of poverty. B. I want to help students succeed. C. I want to help provide access to health care.

3. I WANT TO CONTRIBUTE \$ _____ THIS YEAR THROUGH UNITED WAY OF THE MIDLANDS.

Please choose the method(s) of your contribution below. If you contribute using more than one method, please make sure that the totals in sections A, B, C & D add up to the total above.

<p>A. PAYROLL DEDUCTION You may choose to have a portion of each pay check given through United Way. Please write the amount you wish to have deducted from each pay check in the first blank and the number of paychecks you receive each year in the second blank. Multiply them together for your total contribution.</p> <p>\$ _____ per pay check x # _____ number of pay checks you receive per year = TOTAL \$ _____</p>	<p>B. DIRECT GIFT You may give a one-time contribution through any of the following methods:</p> <p>Cash \$ _____ Money Order \$ _____ Check \$ _____ (make payable to United Way) Check # _____ = TOTAL \$ _____</p>	<p>C. BANK CARD Billing address required in section 1 You may choose a one-time or recurring credit/debit card contribution. (Minimum \$25 contribution per transaction)</p> <p><input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Recurring payment of \$ _____ <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually Beginning on this date _____ OR <input type="checkbox"/> One-Time Gift of \$ _____ CARD NUMBER _____ EXPIRATION DATE (MM/YY) _____ = TOTAL \$ _____</p>	<p>D. BILL ME (Minimum contribution of \$500 required)</p> <p><input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually Beginning on this date: _____ MM-DD-YYYY = TOTAL \$ _____</p>
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4. AFFINITY GROUPS, LEADERSHIP GIVING AND RECOGNITION

<p>AFFINITY GROUPS</p> <p><input type="checkbox"/> MY CONTRIBUTION OF \$250 OR MORE and agreement to step up \$250 each year to \$1,000 within four years qualifies me for the Young Leaders Society (birth date required above, ages 21-45)</p> <p><input type="checkbox"/> MY CONTRIBUTION OF \$500 OR MORE to Women in Philanthropy qualifies me for membership. (You MUST complete the designation box below, indicating code 9595 for Women in Philanthropy.)</p>	<p>LEADERSHIP GIVING</p> <p><input type="checkbox"/> MY CONTRIBUTION OF \$1,000 OR MORE qualifies me for membership in the Palmetto Society</p> <p><input type="checkbox"/> Director's Circle — \$1,000-\$2,499 <input type="checkbox"/> Executive's Circle — \$2,500-\$4,999 <input type="checkbox"/> President's Circle — \$5,000-\$9,999 <input type="checkbox"/> Tocqueville Society — \$10,000+</p> <p><input type="checkbox"/> I AM A LOYAL CONTRIBUTOR TO UNITED WAY I have contributed to United Way since _____ (year).</p>	<p>RECOGNITION</p> <p><input type="checkbox"/> Please list my/our name(s) as follows for recognition: _____</p> <p><input type="checkbox"/> Please do not print my name in any United Way recognition materials.</p>
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5. PLEASE SIGN AND DATE

Signature _____ Date _____
Please check the accuracy of all your entries. Thanks for investing in United Way.

OPTIONAL DESIGNATION—To restrict a portion of your contribution to another United Way or an active partner agency, fill in the amount, name and code. A list of agencies and codes is found on a separate form you may request from your campaign coordinator as well as on www.uway.org. A MINIMUM CONTRIBUTION OF \$50 IS REQUIRED PER DESIGNATED AGENCY. Any contribution to non-partner agencies, inactive agencies, or not meeting minimum requirements shall be directed to United Way. Designated contributions require special handling and are more costly to process. A 12.1% fundraising and processing fee will be deducted from each designation in accordance with United Way Worldwide Membership Standards. Reminder: To receive for the Community Investment Card, at least \$180 of your gift must be unrestricted to United Way. No goods or services were provided in exchange for this contribution.
 Please do not release my name to any designated partner agency.

AMOUNT \$ _____ NAME OF UNITED WAY OR AGENCY _____ CODE _____

6. PLEASE FILL OUT THIS PORTION, DETACH AND KEEP FOR YOUR TAX RECORDS.

United Way of the Midlands Pledge Receipt
LIVE UNITED

I WANT TO CONTRIBUTE \$ _____ THIS YEAR THROUGH UNITED WAY OF THE MIDLANDS.
Please check the accuracy of all your entries. Thanks for investing in United Way.

Print Name _____ Date _____

Thank you for your contribution through the United Way campaign. No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. For contributions through payroll deduction, you will also need a copy of your pay stub, W-2 or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.

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